

**Fill in this information to identify your case:**

United States Bankruptcy Court for the:

CENTRAL DISTRICT OF CALIFORNIA - SAN FERNANDO

Case number (if known) \_\_\_\_\_

Chapter you are filing under:

☐ Chapter 7

☒ Chapter 11

☐ Chapter 12

☐ Chapter 13

☐ Check if this is an amended filing

Official Form 101

**Voluntary Petition for Individuals Filing for Bankruptcy**

04/20

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Identify Yourself**

**About Debtor 1:**

**About Debtor 2 (Spouse Only in a Joint Case):**

**1. Your full name**

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

**Daniel**

First name

**James**

Middle name

**Seavey**

Last name and Suffix (Sr., Jr., II, III)

First name

Middle name

Last name and Suffix (Sr., Jr., II, III)

**2. All other names you have used in the last 8 years**

Include your married or maiden names.

**3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)**

**xxx-xx-4191**

Debtor 1 **Daniel James Seavey**

Case number (if known)

**About Debtor 1:**

**4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years**

Include trade names and *doing business as* names

☐ I have not used any business name or EINs.

**AW CV Entertainment LLC**  
**AW CV Entertainment, Inc.**

Business name(s)

EIN

**About Debtor 2 (Spouse Only in a Joint Case):**

☐ I have not used any business name or EINs.

Business name(s)

EIN

**5. Where you live**

**5635 Bellingham Ave**  
**Valley Village, CA 91607**

Number, Street, City, State & ZIP Code

**Los Angeles**

County

**If your mailing address is different from the one above, fill it in here.** Note that the court will send any notices to you at this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

**If Debtor 2 lives at a different address:**

Number, Street, City, State & ZIP Code

County

**If Debtor 2's mailing address is different from yours, fill it in here.** Note that the court will send any notices to this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

**6. Why you are choosing this district to file for bankruptcy**

Check one:

☒ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

☐ I have another reason.  
Explain. (See 28 U.S.C. § 1408.)

Check one:

☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

☐ I have another reason.  
Explain. (See 28 U.S.C. § 1408.)

Debtor 1 **Daniel James Seavey**

Case number (if known)

**Part 2: Tell the Court About Your Bankruptcy Case**

7. **The chapter of the Bankruptcy Code you are choosing to file under** *Check one.* (For a brief description of each, see *Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)*). Also, go to the top of page 1 and check the appropriate box.
- ☐ Chapter 7
- ☒ Chapter 11
- ☐ Chapter 12
- ☐ Chapter 13
- 
8. **How you will pay the fee** ☒ **I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.
- ☐ **I need to pay the fee in installments.** If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).
- ☐ **I request that my fee be waived** (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.
- 
9. **Have you filed for bankruptcy within the last 8 years?** ☒ No.
- ☐ Yes.
- |          |       |      |       |             |       |
|----------|-------|------|-------|-------------|-------|
| District | _____ | When | _____ | Case number | _____ |
| District | _____ | When | _____ | Case number | _____ |
| District | _____ | When | _____ | Case number | _____ |
- 
10. **Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?** ☒ No.
- ☐ Yes.
- |                       |       |                     |       |
|-----------------------|-------|---------------------|-------|
| Debtor                | _____ | Relationship to you | _____ |
| District              | _____ | When                | _____ |
| Case number, if known | _____ |                     |       |
| Debtor                | _____ | Relationship to you | _____ |
| District              | _____ | When                | _____ |
| Case number, if known | _____ |                     |       |
- 
11. **Do you rent your residence?** ☒ No. Go to line 12.
- ☐ Yes. Has your landlord obtained an eviction judgment against you?
- ☐ No. Go to line 12.
- ☐ Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it as part of this bankruptcy petition.

Debtor 1 **Daniel James Seavey**

Case number (if known)

**Part 3: Report About Any Businesses You Own as a Sole Proprietor**

**12. Are you a sole proprietor of any full- or part-time business?**

☒ No. Go to Part 4.

☐ Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

Name of business, if any

Number, Street, City, State & ZIP Code

*Check the appropriate box to describe your business:*

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))  
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))  
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))  
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))  
☐ None of the above

**13. Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S.C. § 1182(1)?**

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

*If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).*

☐ No. I am not filing under Chapter 11.

☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.

☐ Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11.

☒ Yes. I am filing under Chapter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I choose to proceed under Subchapter V of Chapter 11.

**Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention**

**14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?**

☒ No.

☐ Yes. What is the hazard?

If immediate attention is needed, why is it needed?

*For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?*

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 **Daniel James Seavey**

Case number (if known)

**Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling**

**15. Tell the court whether you have received a briefing about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

**About Debtor 1:**

*You must check one:*

- ☒ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ **I am not required to receive a briefing about credit counseling because of:**

- ☐ **Incapacity.**  
I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
- ☐ **Disability.**  
My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
- ☐ **Active duty.**  
I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

**About Debtor 2 (Spouse Only in a Joint Case):**

*You must check one:*

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ **I am not required to receive a briefing about credit counseling because of:**

- ☐ **Incapacity.**  
I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
- ☐ **Disability.**  
My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
- ☐ **Active duty.**  
I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 **Daniel James Seavey**

Case number (if known)

**Part 6: Answer These Questions for Reporting Purposes**

16. What kind of debts do you have?
- 16a. **Are your debts primarily consumer debts?** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."
- ☒ No. Go to line 16b.
- ☐ Yes. Go to line 17.
- 16b. **Are your debts primarily business debts?** *Business debts* are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.
- ☐ No. Go to line 16c.
- ☒ Yes. Go to line 17.
- 16c. State the type of debts you owe that are not consumer debts or business debts
- 
17. Are you filing under Chapter 7?
- ☒ No. I am not filing under Chapter 7. Go to line 18.
- ☐ Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?
- ☐ No
- ☐ Yes
- 
18. How many Creditors do you estimate that you owe?
- ☒ 1-49
- ☐ 50-99
- ☐ 100-199
- ☐ 200-999
- ☐ 1,000-5,000
- ☐ 5001-10,000
- ☐ 10,001-25,000
- ☐ 25,001-50,000
- ☐ 50,001-100,000
- ☐ More than 100,000
- 
19. How much do you estimate your assets to be worth?
- ☐ \$0 - \$50,000
- ☐ \$50,001 - \$100,000
- ☐ \$100,001 - \$500,000
- ☒ \$500,001 - \$1 million
- ☐ \$1,000,001 - \$10 million
- ☐ \$10,000,001 - \$50 million
- ☐ \$50,000,001 - \$100 million
- ☐ \$100,000,001 - \$500 million
- ☐ \$500,000,001 - \$1 billion
- ☐ \$1,000,000,001 - \$10 billion
- ☐ \$10,000,000,001 - \$50 billion
- ☐ More than \$50 billion
- 
20. How much do you estimate your liabilities to be?
- ☐ \$0 - \$50,000
- ☐ \$50,001 - \$100,000
- ☐ \$100,001 - \$500,000
- ☐ \$500,001 - \$1 million
- ☒ \$1,000,001 - \$10 million
- ☐ \$10,000,001 - \$50 million
- ☐ \$50,000,001 - \$100 million
- ☐ \$100,000,001 - \$500 million
- ☐ \$500,000,001 - \$1 billion
- ☐ \$1,000,000,001 - \$10 billion
- ☐ \$10,000,000,001 - \$50 billion
- ☐ More than \$50 billion

**Part 7: Sign Below**

For you

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3574.

**Daniel James Seavey**  
Signature of Debtor 1

Signature of Debtor 2

Executed on **February 16, 2022**  
MM / DD / YYYYExecuted on  
MM / DD / YYYY

Debtor 1 Daniel James Seavey

Case number (if known) \_\_\_\_\_

**For your attorney, if you are represented by one**

**If you are not represented by an attorney, you do not need to file this page.**

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.



Date February 16, 2022  
MM / DD / YYYY

Signature of Attorney for Debtor

**David L. Neale 141225**

Printed name

**Levene, Neale, Bender, Yoo & Golubchik L.L.P.**

Firm name

**2818 La Cienega Avenue  
Los Angeles, CA 90034**

Number, Street, City, State & ZIP Code

Contact phone (310) 229-1234

Email address dln@lnbyb.com

**141225 CA**

Bar number & State

Certificate Number: 15317-CAC-CC-036214925



15317-CAC-CC-036214925

## CERTIFICATE OF COUNSELING

I CERTIFY that on December 20, 2021, at 2:07 o'clock PM PST, Daniel J Seavey received from Access Counseling, Inc., an agency approved pursuant to 11 U.S.C. 111 to provide credit counseling in the Central District of California, an individual [or group] briefing that complied with the provisions of 11 U.S.C. 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: December 20, 2021 By: /s/Glenn Crisostomo

Name: Glenn Crisostomo

Title: Counselor

\* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. 109(h) and 521(b).



**Statement Pursuant to 11 U.S.C. § 1116(1)(A) and (B)**

I, Daniel James Seavey, declare under penalty of perjury that: (1) attached to this Statement is my most recent Federal Tax Return; and (2) I have not prepared a balance sheet, statement of operations, or cash-flow statement. Executed this 16<sup>th</sup> day of February, 2022, at Los Angeles, California.

A handwritten signature in black ink, appearing to read 'D. Seavey', is written over a horizontal line.

DANIEL JAMES SEAVEY

Form **1040**

Department of the Treasury - Internal Revenue Service

(99)

**2020****EXTENSION GRANTED TO 10/15/21**

OMB No. 1545-0074

IRS Use Only - Do not write or staple in this space.

**U.S. Individual Income Tax Return****Filing Status** ☒ Single ☐ Married filing jointly ☐ Married filing separately (MFS) ☐ Head of household (HOH) ☐ Qualifying widow(er) (QW)

Check only one box. If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent. ▶

Your first name and middle initial <b>DANIEL J.</b>		Last name <b>SEAVEY</b>		Your social security number	
If joint return, spouse's first name and middle initial		Last name		Spouse's social security number	
Home address (number and street). If you have a P.O. box, see instructions. <b>C/O SINGER 6345 BALBOA BL #375</b>				Apt. no.	
City, town, or post office. If you have a foreign address, also complete spaces below. <b>ENCINO</b>				State ZIP code <b>CA 91316</b>	
Foreign country name		Foreign province/state/county		Foreign postal code	
				<b>Presidential Election Campaign</b> Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund. <input type="checkbox"/> You <input type="checkbox"/> Spouse	

At any time during 2020, did you receive, sell, send, exchange, or otherwise acquire any financial interest in any virtual currency? ☐ Yes ☒ No**Standard** Someone can claim: ☐ You as a dependent ☐ Your spouse as a dependent**Deduction** ☐ Spouse itemizes on a separate return or you were a dual-status alien**Age/Blindness** You: ☐ Were born before January 2, 1956 ☐ Are blind **Spouse:** ☐ Was born before January 2, 1956 ☐ Is blind**Dependents** (see instructions):

If more than four dependents, see instr. and check here	(1) First name	Last name	(2) Social security number	(3) Relationship to you	(4) ✓ if qualifies for (see instructions):	
					Child tax credit	Credit for other dependents

1 Wages, salaries, tips, etc. Attach Form(s) W-2. <b>STMT 1</b>		1	2,025.
Attach Sch. B if required.	2a Tax-exempt interest	2a	
	3a Qualified dividends	3a	564.
	4a IRA distributions	4a	
	5a Pensions and annuities	5a	
	6a Social security benefits	6a	
	b Taxable interest	b	
	b Ordinary dividends	3b	1,088.
	b Taxable amount	4b	
	b Taxable amount	5b	
	b Taxable amount	6b	
7 Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ <input type="checkbox"/>		7	-3,000.
8 Other income from Schedule 1, line 9		8	180,464.
9 Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b> ▶		9	180,577.
10 Adjustments to income:			
a From Schedule 1, line 22	10a	12,841.	
b Charitable contributions if you take the standard deduction. See instr. ...	10b		
c Add lines 10a and 10b. These are your <b>total adjustments to income</b> ▶	10c	12,841.	
11 Subtract line 10c from line 9. This is your <b>adjusted gross income</b> ▶		11	167,736.
12 <b>Standard deduction or itemized deductions</b> (from Schedule A)		12	35,504.
13 Qualified business income deduction. Attach Form 8995 or Form 8995-A		13	26,334.
14 Add lines 12 and 13		14	61,838.
15 <b>Taxable income.</b> Subtract line 14 from line 11. If zero or less, enter -0-		15	105,898.

LHA For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form **1040** (2020)

<b>STMT 3</b>	<b>16</b>	<b>Tax</b> (see instructions). Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/>	<b>16</b>	<b>19,445.</b>
	<b>17</b>	Amount from Schedule 2, line 3	<b>17</b>	
	<b>18</b>	Add lines 16 and 17	<b>18</b>	<b>19,445.</b>
	<b>19</b>	Child tax credit or credit for other dependents	<b>19</b>	
	<b>20</b>	Amount from Schedule 3, line 7	<b>20</b>	<b>8.</b>
	<b>21</b>	Add lines 19 and 20	<b>21</b>	<b>8.</b>
	<b>22</b>	Subtract line 21 from line 18. If zero or less, enter -0-	<b>22</b>	<b>19,437.</b>
	<b>23</b>	Other taxes, including self-employment tax, from Schedule 2, line 10	<b>23</b>	<b>21,083.</b>
	<b>24</b>	Add lines 22 and 23. This is your total tax	<b>24</b>	<b>40,520.</b>
	<b>25</b>	Federal income tax withheld from:		
	<b>a</b>	Form(s) W-2 <b>SEE STATEMENT 4</b>	<b>25a</b>	<b>238.</b>
	<b>b</b>	Form(s) 1099	<b>25b</b>	
	<b>c</b>	Other forms (see instructions)	<b>25c</b>	
	<b>d</b>	Add lines 25a through 25c	<b>25d</b>	<b>238.</b>
	<b>26</b>	2020 estimated tax payments and amount applied from 2019 return <b>STATEMENT 5</b>	<b>26</b>	<b>35,700.</b>
	<b>27</b>	Earned income credit (EIC)	<b>27</b>	
	<b>28</b>	Additional child tax credit. Attach Schedule 8812	<b>28</b>	
	<b>29</b>	American opportunity credit from Form 8863, line 8	<b>29</b>	
	<b>30</b>	Recovery rebate credit. See instructions	<b>30</b>	
	<b>31</b>	Amount from Schedule 3, line 13	<b>31</b>	<b>5,000.</b>
	<b>32</b>	Add lines 27 through 31. These are your <b>total other payments and refundable credits</b>	<b>32</b>	<b>5,000.</b>
	<b>33</b>	Add lines 25d, 26, and 32. These are your <b>total payments</b>	<b>33</b>	<b>40,938.</b>
<b>Refund</b>	<b>34</b>	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you <b>overpaid</b>	<b>34</b>	<b>418.</b>
	<b>35a</b>	Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here <input type="checkbox"/>	<b>35a</b>	
Direct deposit? See instructions.	<b>b</b>	Routing number	<b>c</b>	Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings
	<b>d</b>	Account number		
	<b>36</b>	Amount of line 34 you want <b>applied to your 2021 estimated tax</b>	<b>36</b>	<b>414.</b>
<b>Amount You Owe</b>	<b>37</b>	Subtract line 33 from line 24. This is the <b>amount you owe now</b>	<b>37</b>	
For details on how to pay, see instructions.		<b>Note:</b> Schedule H and Schedule SE filers, line 37 may not represent all of the taxes you owe for 2020. See Schedule 3, line 12e, and its instructions for details.		
	<b>38</b>	Estimated tax penalty (see instructions)	<b>38</b>	<b>4.</b>

**Third Party Designee**

Do you want to allow another person to discuss this return with the IRS? See instructions

☒ **Yes. Complete below.**☐ **No**

Designee's

Phone

Personal identification

name **AARON W. ZIMMER**no. **818 774-1000**number (PIN) **17445**

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature

Date

Your occupation

If the IRS sent you an Identity Protection PIN, enter it here (see inst.)

**MUSICAL ARTIST****Sign Here**Joint return?  
See instructions.  
Keep a copy for  
your records.Spouse's signature. If a joint return, **both** must sign.

Date

Spouse's occupation

If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)

Phone no.

Email address **JEFFCV@ICLOUD.COM****Paid Preparer Use Only**

Preparer's name

Preparer's signature

Date

PTIN

Check if:

**AARON W. ZIMMER****AARON W. ZIMMER****10/12/21****P01200721**☐ Self-employed

Phone no.

Firm's name

**SINGER BURKE ZIMMER & KOGAN LLP****818-774-1000****6345 BALBOA BLVD STE 375**

Firm's EIN

**ENCINO, CA 91316****95-4537885**Go to [www.irs.gov/Form1040](http://www.irs.gov/Form1040) for instructions and the latest information.Form **1040** (2020)

**SCHEDULE 1**  
**(Form 1040)**

Department of the Treasury  
Internal Revenue Service

**Additional Income and Adjustments to Income**

▶ Attach to Form 1040, 1040-SR, or 1040-NR.

▶ Go to [www.irs.gov/Form1040](http://www.irs.gov/Form1040) for instructions and the latest information.

OMB No. 1545-0074

**2020**  
Attachment  
Sequence No. **01**

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

**DANIEL J. SEAVEY**

Your social security number

**Part I Additional Income**

<b>1</b>	Taxable refunds, credits, or offsets of state and local income taxes .....	<b>1</b>	
<b>2a</b>	Alimony received .....	<b>2a</b>	
<b>b</b>	Date of original divorce or separation agreement (see instructions) ▶ .....		
<b>3</b>	Business income or (loss). Attach Schedule C .....	<b>3</b>	
<b>4</b>	Other gains or (losses). Attach Form 4797 .....	<b>4</b>	
<b>5</b>	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E .....	<b>5</b>	<b>180,464.</b>
<b>6</b>	Farm income or (loss). Attach Schedule F .....	<b>6</b>	
<b>7</b>	Unemployment compensation .....	<b>7</b>	
<b>8</b>	Other income. List type and amount ▶ .....	<b>8</b>	
<b>9</b>	Combine lines 1 through 8. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8 .....	<b>9</b>	<b>180,464.</b>

**Part II Adjustments to Income**

<b>10</b>	Educator expenses .....	<b>10</b>	
<b>11</b>	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 .....	<b>11</b>	
<b>12</b>	Health savings account deduction. Attach Form 8889 .....	<b>12</b>	
<b>13</b>	Moving expenses for members of the Armed Forces. Attach Form 3903 .....	<b>13</b>	
<b>14</b>	Deductible part of self-employment tax. Attach Schedule SE .....	<b>14</b>	<b>10,542.</b>
<b>15</b>	Self-employed SEP, SIMPLE, and qualified plans .....	<b>15</b>	
<b>16</b>	Self-employed health insurance deduction .....	<b>16</b>	<b>2,299.</b>
<b>17</b>	Penalty on early withdrawal of savings .....	<b>17</b>	
<b>18a</b>	Alimony paid .....	<b>18a</b>	
<b>b</b>	Recipient's SSN .....		
<b>c</b>	Date of original divorce or separation agreement (see instructions) ▶ .....		
<b>19</b>	IRA deduction .....	<b>19</b>	
<b>20</b>	Student loan interest deduction .....	<b>20</b>	
<b>21</b>	Tuition and fees deduction. Attach Form 8917 .....	<b>21</b>	
<b>22</b>	Add lines 10 through 21. These are your <b>adjustments to income</b> . Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10a .....	<b>22</b>	<b>12,841.</b>

LHA **For Paperwork Reduction Act Notice, see your tax return instructions.**

Schedule 1 (Form 1040) 2020

**SCHEDULE 2**  
**(Form 1040)**Department of the Treasury  
Internal Revenue Service**Additional Taxes**

OMB No. 1545-0074

**2020**  
Attachment  
Sequence No. **02**

▶ Attach to Form 1040, 1040-SR, or 1040-NR.

▶ Go to [www.irs.gov/Form1040](https://www.irs.gov/Form1040) for instructions and the latest information.

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

Your social security number

**DANIEL J. SEAVEY****Part I Tax**

<b>1</b>	Alternative minimum tax. Attach Form 6251 .....	<b>1</b>	0.
<b>2</b>	Excess advance premium tax credit repayment. Attach Form 8962 .....	<b>2</b>	
<b>3</b>	Add lines 1 and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17 .....	<b>3</b>	0.

**Part II Other Taxes**

<b>4</b>	Self-employment tax. Attach Schedule SE .....	<b>4</b>	21,083.
<b>5</b>	Unreported social security and Medicare tax from Form: <b>a</b> <input type="checkbox"/> 4137 <b>b</b> <input type="checkbox"/> 8919 .....	<b>5</b>	
<b>6</b>	Additional tax on IRAs, other qualified retirement plans, and other tax-favored accounts. Attach Form 5329 if required .....	<b>6</b>	
<b>7a</b>	Household employment taxes. Attach Schedule H .....	<b>7a</b>	
<b>b</b>	Repayment of first-time homebuyer credit from Form 5405. Attach Form 5405 if required .....	<b>7b</b>	
<b>8</b>	Taxes from: <b>a</b> <input type="checkbox"/> Form 8959 <b>b</b> <input type="checkbox"/> Form 8960 <b>c</b> <input type="checkbox"/> Instructions; enter code(s) .....	<b>8</b>	
<b>9</b>	Section 965 net tax liability installment from Form 965-A .....	<b>9</b>	
<b>10</b>	Add lines 4 through 8. These are your <b>total other taxes</b> . Enter here and on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b .....	<b>10</b>	21,083.

LHA For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 2 (Form 1040) 2020

**SCHEDULE 3**  
**(Form 1040)**

Department of the Treasury  
Internal Revenue Service

**Additional Credits and Payments**

▶ Attach to Form 1040, 1040-SR, or 1040-NR.

▶ Go to [www.irs.gov/Form1040](http://www.irs.gov/Form1040) for instructions and the latest information.

OMB No. 1545-0074

**2020**  
Attachment  
Sequence No. **03**

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

Your social security number

**DANIEL J. SEAVEY**

**Part I Nonrefundable Credits**

<b>1</b>	Foreign tax credit. Attach Form 1116 if required .....	<b>1</b>	<b>8.</b>
<b>2</b>	Credit for child and dependent care expenses. Attach Form 2441 .....	<b>2</b>	
<b>3</b>	Education credits from Form 8863, line 19 .....	<b>3</b>	
<b>4</b>	Retirement savings contributions credit. Attach Form 8880 .....	<b>4</b>	
<b>5</b>	Residential energy credits. Attach Form 5695 .....	<b>5</b>	
<b>6</b>	Other credits from Form: <b>a</b> <input type="checkbox"/> 3800 <b>b</b> <input type="checkbox"/> 8801 <b>c</b> <input type="checkbox"/> .....	<b>6</b>	
<b>7</b>	Add lines 1 through 6. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 20 .....	<b>7</b>	<b>8.</b>

**Part II Other Payments and Refundable Credits**

<b>8</b>	Net premium tax credit. Attach Form 8962 .....	<b>8</b>	
<b>9</b>	Amount paid with request for extension to file (see instructions) .....	<b>9</b>	<b>5,000.</b>
<b>10</b>	Excess social security and tier 1 RRTA tax withheld .....	<b>10</b>	
<b>11</b>	Credit for federal tax on fuels. Attach Form 4136 .....	<b>11</b>	
<b>12</b>	Other payments or refundable credits:		
<b>a</b>	Form 2439 .....	<b>12a</b>	
<b>b</b>	Qualified sick and family leave credits from Schedule(s) H and Form(s) 7202 .....	<b>12b</b>	
<b>c</b>	Health coverage tax credit from Form 8885 .....	<b>12c</b>	
<b>d</b>	Other: .....	<b>12d</b>	
<b>e</b>	Deferral for certain Schedule H or SE filers (see instructions) .....	<b>12e</b>	
<b>f</b>	Add lines 12a through 12e .....	<b>12f</b>	
<b>13</b>	Add lines 8 through 12f. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 31 .....	<b>13</b>	<b>5,000.</b>

LHA **For Paperwork Reduction Act Notice, see your tax return instructions.**

Schedule 3 (Form 1040) 2020

## Recovery Rebate Credit Worksheet - Line 30

Name(s) shown on return <b>DANIEL J. SEAVEY</b>	Your SSN
--	----------

**Before you begin:**    ✓ See the instructions for line 30 to find out if you can take this credit and for definitions and other information needed to fill out this worksheet.  
                                  ✓ If you received Notice 1444 and Notice 1444-B, have them available.

Don't include on line 16 or 19 any amount you received but later returned to the IRS.

1. Can you be claimed as a dependent on another person's 2020 return? If filing a joint return, go to line 2.  
☒ **No.** Go to line 2.  
☐ **Yes.** Stop. You can't take the credit. Don't complete the rest of this worksheet and don't enter any amount on line 30.

2. Does your 2020 return include a valid social security number (defined under *Valid social security number*, earlier) for you and, if filing a joint return, your spouse?  
☒ **Yes.** Skip lines 3 and 4, and go to line 5.  
If you are filing a joint return, go to line 3.  
☐ **No.** If you aren't filing a joint return, STOP you can't take the credit. Don't complete the rest of this worksheet and don't enter any amount on line 30.

3. Was at least one of you a member of the U.S. Armed Forces at any time during 2020, and does at least one of you have a valid social security number (defined under *Valid social security number*, earlier)?  
☐ **Yes.** Your credit is not limited. Go to line 5.  
☐ **No.** Go to line 4.

4. Does one of you have a valid social security number (defined under *Valid social security number*, earlier)?  
☐ **Yes.** Your credit is limited. Go to line 5.  
☐ **No.** Stop. You can't take the credit. Don't complete the rest of this worksheet and don't enter any amount on line 30.

5. If your EIP 1 was \$1,200 (\$2,400 if married filing jointly) plus \$500 for each qualifying child you had in 2020, skip lines 5 and 6, enter zero on lines 7 and 16, and go to line 8. Otherwise, enter:  
    • \$1,200 if single, head of household, married filing separately, qualifying widow(er), or if married filing jointly and you answered "Yes" to question 4, or  
    • \$2,400 if married filing jointly and you answered "Yes" to question 2 or 3 ..... 5. 1,200.

6. Multiply \$500 by the number of qualifying children under age 17 at the end of 2020 listed in the Dependents section on page 1 of Form 1040 or 1040-SR for whom you either checked the "Child tax credit" box or entered an adoption taxpayer identification number ..... 6. \_\_\_\_\_

7. Add lines 5 and 6 ..... 7. 1,200.

8. If your EIP 2 was \$600 (\$1,200 if married filing jointly) plus \$600 for each qualifying child you had in 2020, skip lines 8 and 9, enter zero on lines 10 and 19, and go to line 11. Otherwise, enter:  
    • \$600 if single, head of household, married filing separately, qualifying widow(er), or if married filing jointly and you answered "Yes" to question 4, or  
    • \$1,200 if married filing jointly and you answered "Yes" to question 2 or 3 ..... 8. 600.

9. Multiply \$600 by the number of qualifying children under age 17 at the end of 2020 listed in the Dependents section on page 1 of Form 1040 or 1040-SR for whom you either checked the "Child tax credit" box or entered an adoption taxpayer identification number ..... 9. \_\_\_\_\_

10. Add lines 8 and 9 ..... 10. 600.

11. Enter the amount from line 11 of Form 1040 or 1040-SR ..... 11. 167,736.

12. Enter the amount shown below for your filing status:  
    • \$150,000 if married filing jointly or qualifying widow(er)  
    • \$112,500 if head of household  
    • \$75,000 if single or married filing separately } ..... 12. 75,000.

13. Is the amount on line 11 more than the amount on line 12?  
☐ **No.** Skip line 14. Enter the amount from line 7 on line 15 and the amount from line 10 on line 18.  
☒ **Yes.** Subtract line 12 from line 11. .... 13. 92,736.

14. Multiply line 13 by 5% (0.05) ..... 14. 4,637.

15. Subtract line 14 from line 7. If zero or less, enter -0- ..... 15. 0.

16. Enter the amount, if any, of EIP 1 that was issued to you (before offset for any past-due child support payment). You may refer to Notice 1444 or your tax account information at [IRS.gov/Account](https://www.irs.gov/Account) for the amount to enter here ..... 16. 0.

17. Subtract line 16 from line 15. If zero or less, enter -0-. If line 16 is more than line 15, you don't have to pay back the difference ..... 17. 0.

18. Subtract line 14 from line 10. If zero or less, enter -0- ..... 18. 0.

19. Enter the amount, if any, of EIP 2 that was issued to you. You may refer to Notice 1444-B or your tax account information at [IRS.gov/Account](https://www.irs.gov/Account) for the amount to enter here ..... 19. 0.

20. Subtract line 19 from line 18. If zero or less, enter -0-. If line 19 is more than line 18, you don't have to pay back the difference ..... 20. 0.

21. **Recovery rebate credit.** Add lines 17 and 20. Enter the result here and, if more than zero, on line 30 of Form 1040 or 1040-SR ..... 21. 0.

010161 01-06-21

Form **2210**Department of the Treasury  
Internal Revenue Service**Underpayment of Estimated Tax by  
Individuals, Estates, and Trusts**▶ Go to [www.irs.gov/Form2210](http://www.irs.gov/Form2210) for instructions and the latest information.

▶ Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

OMB No.1545-0074

**2020**  
Attachment  
Sequence No. **06**

Name(s) shown on tax return

**DANIEL J. SEAVEY**

Identifying number

**Do You Have To File Form 2210?**

Complete lines 1 through 7 below. Is line 4 or line 7 less than \$1,000?	Yes	<b>Don't file Form 2210.</b> You don't owe a penalty.
No		
Complete lines 8 and 9 below. Is line 6 equal to or more than line 9?	Yes	You <b>don't</b> owe a penalty. <b>Don't</b> file Form 2210 unless <b>box E</b> in Part II applies, then file page 1 of Form 2210.
No		
You may owe a penalty. Does any box in Part II below apply?	Yes	You <b>must</b> file Form 2210. Does box <b>B, C, or D</b> in Part II apply?
No		
	No	<b>Don't file Form 2210.</b> You aren't required to figure your penalty because the IRS will figure it and send you a bill for any unpaid amount. If you want to figure it, you may use Part III or Part IV as a worksheet and enter your penalty amount on your tax return, but <b>don't file Form 2210.</b>
	Yes	You <b>must</b> figure your penalty.
	No	You <b>aren't</b> required to figure your penalty because the IRS will figure it and send you a bill for any unpaid amount. If you want to figure it, you may use Part III or Part IV as a worksheet and enter your penalty amount on your tax return, but <b>file only page 1 of Form 2210.</b>

**Part I Required Annual Payment**

1	Enter your 2020 tax after credits from Form 1040, 1040-SR, or 1040-NR, line 22. (See the instructions if not filing Form 1040.)	1	19,437.
2	Other taxes, including the portion of 2020 self-employment tax to which the estimated tax requirement applies and, if applicable, Additional Medicare Tax and/or Net Investment Income Tax (see instructions)	2	21,083.
3	Refundable credits, including the premium tax credit (see instructions)	3	( )
4	Current year tax. Combine lines 1, 2, and 3. If less than \$1,000, <b>stop</b> ; you don't owe a penalty. <b>Don't</b> file Form 2210	4	40,520.
5	Multiply line 4 by 90% (0.90)	5	36,468.
6	Withholding taxes. <b>Don't</b> include estimated tax payments. See instructions	6	238.
7	Subtract line 6 from line 4. If less than \$1,000, <b>stop</b> ; you don't owe a penalty. <b>Don't</b> file Form 2210	7	40,282.
8	Maximum required annual payment based on prior year's tax (see instructions)	8	98,424.
9	<b>Required annual payment.</b> Enter the <b>smaller</b> of line 5 or line 8	9	36,468.

Next: Is line 9 more than line 6?

☐ **No.** You **don't** owe a penalty. **Don't** file Form 2210 unless box **E** below applies.☒ **Yes.** You may owe a penalty, but **don't** file Form 2210 unless one or more boxes in Part II below applies.• If box **B, C, or D** applies, you must figure your penalty and file Form 2210.• If box **A or E** applies (but not **B, C, or D**), file only page 1 of Form 2210. You **aren't** required to figure your penalty; the IRS will figure it and send you a bill for any unpaid amount. If you want to figure your penalty, you may use Part III or IV as a worksheet and enter your penalty on your tax return, but **file only page 1 of Form 2210.****Part II Reasons for Filing.** Check applicable boxes. If none apply, **don't** file Form 2210.

- A** ☐ You request a **waiver** (see instructions) of your entire penalty. You must check this box and file page 1 of Form 2210, but you aren't required to figure your penalty.
- B** ☐ You request a **waiver** (see instructions) of part of your penalty. You must figure your penalty and waiver amount and file Form 2210.
- C** ☐ Your income varied during the year and your penalty is reduced or eliminated when figured using the **annualized income installment method**. You must figure the penalty using Schedule AI and file Form 2210.
- D** ☐ Your penalty is lower when figured by treating the federal income tax withheld from your income as paid on the dates it was actually withheld, instead of in equal amounts on the payment due dates. You must figure your penalty and file Form 2210.
- E** ☐ You filed or are filing a joint return for either 2019 or 2020, but not for both years, and line 8 above is smaller than line 5 above. You must file page 1 of Form 2210, but you **aren't** required to figure your penalty (unless box **B, C, or D** applies).

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form 2210 (2020)



Form 2210 (2020) DANIEL J. SEAVEY

Page 3

**Part IV Regular Method** (See the instructions if you're filing Form 1040-NR.)**Section A - Figure Your Underpayment**

(Calendar year filers skip column (b); fiscal year filers, see instructions.)

		Payment Due Dates			
		(a) 7/15/20	(b)	(c) 9/15/20	(d) 1/15/21
<b>18 Required installments.</b> If box C in Part II applies, combine the Schedule AI, line 27, columns (a) and (b) amounts and enter the result here in column (a), then enter the Schedule AI, line 27, columns (c) and (d) amounts in the corresponding columns (c) and (d) here. Otherwise, calendar year filers, enter the following percentages of Form 2210, line 9, as follows: 50% (0.50) in column (a) and 25% (0.25) in columns (c) and (d) (skip column (b) entirely). For fiscal year filers, see instructions	18	18,234.		9,117.	9,117.
<b>19</b> Estimated tax paid and tax withheld (see the instructions). For column (a) only, also enter the amount from line 19 on line 23, column (a). If line 19 is equal to or more than line 18 for all payment periods, stop here; you don't owe a penalty. <b>Don't file Form 2210 unless you checked a box in Part II</b>	19	35,820.		60.	58.

Complete lines 20 through 26 of one column before going to line 20 of the next column.

<b>20</b> Enter the amount, if any, from line 26 in the previous column	20		17,586.	17,586.	8,529.
<b>21</b> Add lines 19 and 20	21		17,586.	17,646.	8,587.
<b>22</b> Add the amounts on lines 24 and 25 in the previous column	22				
<b>23</b> Subtract line 22 from line 21. If zero or less, enter -0-. For column (a) only, enter the amount from line 19	23	35,820.	17,586.	17,646.	8,587.
<b>24</b> If line 23 is zero, subtract line 21 from line 22. Otherwise, enter -0-	24		0.	0.	
<b>25 Underpayment.</b> If line 18 is equal to or more than line 23, subtract line 23 from line 18. Then go to line 20 of the next column. Otherwise, go to line 26	25				530.
<b>26</b> Overpayment. If line 23 is more than line 18, subtract line 18 from line 23. Then go to line 20 of the next column	26	17,586.	17,586.	8,529.	

**Section B - Figure the Penalty** (Use the Worksheet for Form 2210, Part IV, Section B - Figure the Penalty in the instructions.)

<b>27 Penalty.</b> Enter the total penalty from line 14 of the Worksheet for Form 2210, Part IV, Section B - Figure the Penalty. Also include this amount on Form 1040, 1040-SR, or 1040-NR, line 38; or Form 1041, line 27. <b>Don't file Form 2210 unless you checked a box in Part II</b>	27	4.
--	----	----

Form 2210 (2020)

SEE ATTACHED WORKSHEET

\* Date of estimated tax payment, withholding credit date or installment due date.

**SCHEDULE A**  
(Form 1040)**Itemized Deductions**

OMB No. 1545-0074

**2020**  
Attachment  
Sequence No. **07**Department of the Treasury  
Internal Revenue Service

(99)

▶ Go to [www.irs.gov/ScheduleA](http://www.irs.gov/ScheduleA) for instructions and the latest information.

▶ Attach to Form 1040 or 1040-SR.

**Caution:** If you are claiming a net qualified disaster loss on Form 4684, see the instructions for line 16.

Name(s) shown on Form 1040 or 1040-SR

Your social security number

**DANIEL J. SEAVEY****Medical and Dental Expenses****Caution:** Do not include expenses reimbursed or paid by others.

- |   |   |   |         |
|---|---|---|---------|
| 1 | Medical and dental expenses (see instructions) <b>SEE STATEMENT 8</b> | 1 | 775.    |
| 2 | Enter amount from Form 1040 or 1040-SR, line 11 <b>2</b> 167,736.     |   |         |
| 3 | Multiply line 2 by 7.5% (0.075)                                       | 3 | 12,580. |
| 4 | Subtract line 3 from line 1. If line 3 is more than line 1, enter -0- | 4 | 0.      |

**Taxes You Paid**

- |   |   |    |         |
|---|---|----|---------|
| 5 | State and local taxes.  |    |         |
| a | State and local income taxes or general sales taxes. You may include either income taxes or general sales taxes on line 5a, but not both. If you elect to include general sales taxes instead of income taxes, check this box <b>SEE STATEMENT 7</b> ▶ <input type="checkbox"/> | 5a | 21,691. |
| b | State and local real estate taxes (see instructions)  | 5b | 11,663. |
| c | State and local personal property taxes   | 5c |         |
| d | Add lines 5a through 5c   | 5d | 33,354. |
| e | Enter the smaller of line 5d or \$10,000 (\$5,000 if married filing separately)   | 5e | 10,000. |
| 6 | Other taxes. List type and amount ▶   | 6  |         |
| 7 | Add lines 5e and 6  | 7  | 10,000. |

**Interest You Paid****Caution:** Your mortgage interest deduction may be limited (see instructions).

- |    |   |    |         |
|----|---|----|---------|
| 8  | Home mortgage interest and points. If you didn't use all of your home mortgage loan(s) to buy, build, or improve your home, see instructions and check this box ▶ <input type="checkbox"/>                              |    |         |
| a  | Home mortgage interest and points reported to you on Form 1098. See instructions if limited   | 8a | 25,504. |
| b  | Home mortgage interest not reported to you on Form 1098. See instructions if limited. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., and address ▶ | 8b |         |
| c  | Points not reported to you on Form 1098. See instructions for special rules   | 8c |         |
| d  | Mortgage insurance premiums (see instructions)  | 8d |         |
| e  | Add lines 8a through 8d   | 8e | 25,504. |
| 9  | Investment interest. Attach Form 4952 if required. See instructions   | 9  |         |
| 10 | Add lines 8e and 9  | 10 | 25,504. |

**Gifts to Charity****Caution:** If you made a gift and got a benefit for it, see instructions.

- |    |  |    |  |
|----|--|----|--|
| 11 | Gifts by cash or check. If you made any gift of \$250 or more, see instructions  | 11 |  |
| 12 | Other than by cash or check. If you made any gift of \$250 or more, see instructions. You <b>must</b> attach Form 8283 if over \$500 | 12 |  |
| 13 | Carryover from prior year  | 13 |  |
| 14 | Add lines 11 through 13  | 14 |  |

**Casualty and Theft Losses**

- |    |  |    |  |
|----|--|----|--|
| 15 | Casualty and theft loss(es) from a federally declared disaster (other than net qualified disaster losses). Attach Form 4684 and enter the amount from line 18 of that form. See instructions | 15 |  |
|----|--|----|--|

**Other Itemized Deductions**

- |    |   |    |  |
|----|---|----|--|
| 16 | Other - from list in instructions. List type and amount ▶ | 16 |  |
|----|---|----|--|

**Total Itemized Deductions**

- |    |  |    |         |
|----|--|----|---------|
| 17 | Add the amounts in the far right column for lines 4 through 16. Also, enter this amount on Form 1040 or 1040-SR, line 12             | 17 | 35,504. |
| 18 | If you elect to itemize deductions even though they are less than your standard deduction, check this box ▶ <input type="checkbox"/> |    |         |

LHA For Paperwork Reduction Act Notice, see the Instructions for Forms 1040 and 1040-SR.

Schedule A (Form 1040) 2020

019501 12-09-20

**SCHEDULE B**

(Form 1040)

Department of the Treasury  
Internal Revenue Service (99)  
Name(s) shown on return**Interest and Ordinary Dividends**▶ Go to [www.irs.gov/ScheduleB](http://www.irs.gov/ScheduleB) for instructions and the latest information.

▶ Attach to Form 1040 or 1040-SR.

OMB No. 1545-0074

**2020**  
Attachment  
Sequence No. **08**

Your social security number

**DANIEL J. SEAVEY****Part I****Interest**

- 1 List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see the instructions and list this interest first. Also, show that buyer's social security number and address ▶

**Note:** If you received a Form 1099-INT, Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that form.

- 2 Add the amounts on line 1
- 3 Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815
- 4 Subtract line 3 from line 2. Enter the result here and on Form 1040 or 1040-SR, line 2b ▶

**Note:** If line 4 is over \$1,500, you must complete Part III.**Part II****Ordinary Dividends**

- 5 List name of payer ▶  
**FIDELITY 2746**

**Note:** If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the payer and enter the ordinary dividends shown on that form.

- 6 Add the amounts on line 5. Enter the total here and on Form 1040 or 1040-SR, line 3b ▶

**Note:** If line 6 is over \$1,500, you must complete Part III.**Part III****Foreign Accounts and Trusts**

**Caution:** If required, failure to file FinCEN Form 114 may result in substantial penalties. See instructions.

027501 11-05-20

You must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; (b) had a foreign account; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust.

- 7a At any time during 2020, did you have a financial interest in or signature authority over a financial account (such as a bank account, securities account, or brokerage account) located in a foreign country? See instructions
- If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR), to report that financial interest or signature authority? See FinCEN Form 114 and its instructions for filing requirements and exceptions to those requirements
- b If you are required to file FinCEN Form 114, enter the name of the foreign country where the financial account is located ▶
- 8 During 2020, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? If "Yes," you may have to file Form 3520. See instructions

Yes	No
	X

LHA For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule B (Form 1040) 2020

**Interest and Dividend Summary**

Name: DANIEL J. SEAVEY

FEIN/SSN:

	Payer	Interest	Interest on U.S. Savings Bonds	Tax-Exempt Interest	Private Activity Interest	Market Discount	Original Issue Discount (OID)	Ordinary Dividends	Qualified Dividends
A	FIDELITY 2746							1,088.	564.
B									
C									
D									
E									
F									
G									
H									
I									
J									
K									
Totals								1,088.	564.

	Capital Gain Distributions	Unrecaptured Section 1250 Gain	Section 1202 Gain	Collectibles	Section 199A Dividends	Investment Expenses	Federal Tax Withheld	State Tax Withheld	Foreign Tax Paid
A	61.				25.				21.
B									
C									
D									
E									
F									
G									
H									
I									
J									
K									
Totals	61.				25.				21.

**SCHEDULE D****(Form 1040)**Department of the Treasury  
Internal Revenue Service (99)**Capital Gains and Losses**

▶ Attach to Form 1040, 1040-SR, or 1040-NR.

▶ Go to [www.irs.gov/ScheduleD](http://www.irs.gov/ScheduleD) for instructions and the latest information.

▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

OMB No. 1545-0074

**2020**Attachment  
Sequence No. **12**

Name(s) shown on return

Your social security number

**DANIEL J. SEAVEY**Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? ☐ Yes ☒ No

If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

**Part I Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less** (see instructions)

See instructions for how to figure the amounts to enter on the lines below.

This form may be easier to complete if you round off cents to whole dollars.

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
<b>1a</b> Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b .....	12,564.	12,237.		327.
<b>1b</b> Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked .....				
<b>2</b> Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked .....				
<b>3</b> Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked .....				
<b>4</b> Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 .....				<b>4</b>
<b>5</b> Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 .....				<b>5</b>
<b>6</b> Short-term capital loss carryover. Enter the amount, if any, from line 8 of your <b>Capital Loss Carryover Worksheet</b> in the instructions .....				<b>6</b> ( )
<b>7</b> <b>Net short-term capital gain or (loss).</b> Combine lines 1a through 6 in column (h). If you have any long-term capital gains or losses, go to Part II below. Otherwise, go to Part III on page 2 .....				<b>7</b> 327.

**Part II Long-Term Capital Gains and Losses - Generally Assets Held More Than One Year** (see instructions)

See instructions for how to figure the amounts to enter on the lines below.

This form may be easier to complete if you round off cents to whole dollars.

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
<b>8a</b> Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b .....	25,834.	31,119.		<5,285.>
<b>8b</b> Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked .....				
<b>9</b> Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked .....				
<b>10</b> Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked .....				
<b>11</b> Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824 .....				<b>11</b>
<b>12</b> Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 .....				<b>12</b>
<b>13</b> Capital gain distributions ..... <b>SEE STATEMENT 11</b>				<b>13</b> 61.
<b>14</b> Long-term capital loss carryover. Enter the amount, if any, from line 13 of your <b>Capital Loss Carryover Worksheet</b> in the instructions .....				<b>14</b> ( )
<b>15</b> <b>Net long-term capital gain or (loss).</b> Combine lines 8a through 14 in column (h). Then, go to Part III on page 2 .....				<b>15</b> <5,224.>

LHA For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule D (Form 1040) 2020

**Part III Summary**

<b>16</b> Combine lines 7 and 15 and enter the result .....	<b>16</b>	<4,897.>
<ul style="list-style-type: none"><li>• If line 16 is a <b>gain</b>, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below.</li><li>• If line 16 is a <b>loss</b>, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22.</li><li>• If line 16 is <b>zero</b>, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22.</li></ul>		
<b>17</b> Are lines 15 and 16 <b>both</b> gains? <input type="checkbox"/> <b>Yes.</b> Go to line 18. <input type="checkbox"/> <b>No.</b> Skip lines 18 through 21, and go to line 22.		
<b>18</b> If you are required to complete the <b>28% Rate Gain Worksheet</b> (see instructions), enter the amount, if any, from line 7 of that worksheet .....	<b>18</b>	
<b>19</b> If you are required to complete the <b>Unrecaptured Section 1250 Gain Worksheet</b> (see instructions), enter the amount, if any, from line 18 of that worksheet .....	<b>19</b>	
<b>20</b> Are lines 18 and 19 both zero or blank and are you not filing Form 4952?  <input type="checkbox"/> <b>Yes.</b> Complete the <b>Qualified Dividends and Capital Gain Tax Worksheet</b> in the instructions for Forms 1040 and 1040-SR, line 16. <b>Don't</b> complete lines 21 and 22 below.  <input type="checkbox"/> <b>No.</b> Complete the <b>Schedule D Tax Worksheet</b> in the instructions. <b>Don't</b> complete lines 21 and 22 below.		
<b>21</b> If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the <b>smaller</b> of:  <ul style="list-style-type: none"><li>• The loss on line 16; or</li><li>• (\$3,000), or if married filing separately, (\$1,500)</li></ul> <div style="display: flex; align-items: center;"><div style="font-size: 3em; margin-right: 10px;">}</div><div>..... <b>SEE STATEMENT 12</b> .....</div></div>	<b>21</b>	( 3,000.)
<b>Note:</b> When figuring which amount is smaller, treat both amounts as positive numbers.		
<b>22</b> Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?  <input checked="" type="checkbox"/> <b>Yes.</b> Complete the <b>Qualified Dividends and Capital Gain Tax Worksheet</b> in the instructions for Forms 1040 and 1040-SR, line 16.  <input type="checkbox"/> <b>No.</b> Complete the rest of Form 1040, 1040-SR, or 1040-NR.		

Schedule D (Form 1040) 2020

**Qualified Dividends and Capital Gain Tax Worksheet - Line 16**

Keep for Your Records

Name(s) shown on return <b>DANIEL J. SEAVEY</b>		Your SSN
--	--	----------

**Before you begin:**

- ✓ See the earlier instructions for line 16 to see if you can use this worksheet to figure your tax.
- ✓ Before completing this worksheet, complete Form 1040 or 1040-SR through line 15.
- ✓ If you don't have to file Schedule D and you received capital gain distributions, be sure you checked the box on Form 1040 or 1040-SR, line 7.

1. Enter the amount from Form 1040 or 1040-SR, line 15. However, if you are filing Form 2555 (relating to foreign earned income), enter the amount from line 3 of the Foreign Earned Income Tax Worksheet ..... **1. 105,898.**
2. Enter the amount from Form 1040 or 1040-SR, line 3a\* ..... **2. 564.**
3. Are you filing Schedule D?\*

<input checked="" type="checkbox"/> <b>Yes.</b> Enter the <b>smaller</b> of line 15 or 16 of Schedule D. If either line 15 or 16 is blank or a loss, enter -0-.	}	<b>3. 0.</b>
<input type="checkbox"/> <b>No.</b> Enter the amount from Form 1040 or 1040-SR, line 7.		

4. Add lines 2 and 3 ..... **4. 564.**
5. Subtract line 4 from line 1. If zero or less, enter -0- ..... **5. 105,334.**
6. Enter:
 

\$ 40,000 if single or married filing separately, \$ 80,000 if married filing jointly or qualifying widow(er), \$ 53,600 if head of household.	}	<b>6. 40,000.</b>
--	---	-------------------
7. Enter the smaller of line 1 or line 6 ..... **7. 40,000.**
8. Enter the smaller of line 5 or line 7 ..... **8. 40,000.**
9. Subtract line 8 from line 7. This amount is taxed at 0% ..... **9. 0.**
10. Enter the smaller of line 1 or line 4 ..... **10. 564.**
11. Enter the amount from line 9 ..... **11. 0.**
12. Subtract line 11 from line 10 ..... **12. 564.**
13. Enter:
 

\$ 441,450 if single, \$ 248,300 if married filing separately, \$ 496,600 if married filing jointly or qualifying widow(er), \$ 469,050 if head of household.	}	<b>13. 441,450.</b>
--	---	---------------------
14. Enter the smaller of line 1 or line 13 ..... **14. 105,898.**
15. Add lines 5 and 9 ..... **15. 105,334.**
16. Subtract line 15 from line 14. If zero or less, enter -0- ..... **16. 564.**
17. Enter the smaller of line 12 or line 16 ..... **17. 564.**
18. Multiply line 17 by 15% (0.15) ..... **18. 85.**
19. Add lines 9 and 17 ..... **19. 564.**
20. Subtract line 19 from line 10 ..... **20. 0.**
21. Multiply line 20 by 20% (0.20) ..... **21. 0.**
22. Figure the tax on the amount on line 5. If the amount on line 5 is less than \$100,000, use the Tax Table to figure the tax. If the amount on line 5 is \$100,000 or more, use the Tax Computation Worksheet ..... **22. 19,360.**
23. Add lines 18, 21, and 22 ..... **23. 19,445.**
24. Figure the tax on the amount on line 1. If the amount on line 1 is less than \$100,000, use the Tax Table to figure the tax. If the amount on line 1 is \$100,000 or more, use the Tax Computation Worksheet ..... **24. 19,495.**
25. **Tax on all taxable income.** Enter the **smaller** of line 23 or 24. Also include this amount on the entry space on Form 1040 or 1040-SR, line 16. If you are filing Form 2555, don't enter this amount on the entry space on Form 1040 or 1040-SR, line 16. Instead, enter it on line 4 of the Foreign Earned Income Tax Worksheet ..... **25. 19,445.**

\* If you are filing Form 2555, see the footnote in the Foreign Earned Income Tax Worksheet before completing this line.



Main Document Page 25 of 68  
**Supplemental Income and Loss****SCHEDULE E**  
**(Form 1040)**Department of the Treasury  
Internal Revenue Service (99)

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

▶ Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

▶ Go to [www.irs.gov/ScheduleE](http://www.irs.gov/ScheduleE) for instructions and the latest information.

OMB No. 1545-0074

**2020**  
Attachment  
Sequence No. **13**

Name(s) shown on return

Your social security number

**DANIEL J. SEAVEY****Part I** **Income or Loss From Rental Real Estate and Royalties** Note: If you are in the business of renting personal property, use **Schedule C**. See instructions. If you are an individual, report farm rental income or loss from **Form 4835** on page 2, line 40.**A** Did you make any payments in 2020 that would require you to file Form(s) 1099? See instructions ☐ Yes ☒ No  
**B** If "Yes," did you or will you file required Form(s) 1099? ☐ Yes ☐ No**1a** Physical address of each property (street, city, state, ZIP code)**A**  
**B**  
**C**

1b	Type of Property (from list below)	2	Fair Rental Days	Personal Use Days	QJV
<b>A</b>	6	For each rental real estate property listed above, report the number of fair rental and personal use days. Check the <b>QJV</b> box only if you meet the requirements to file as a qualified joint venture. See instructions.	<b>A</b>		<input type="checkbox"/>
<b>B</b>			<b>B</b>		<input type="checkbox"/>
<b>C</b>			<b>C</b>		<input type="checkbox"/>

**Type of Property:**

- |                           |                              |             |                    |
|---------------------------|------------------------------|-------------|--------------------|
| 1 Single Family Residence | 3 Vacation/Short-Term Rental | 5 Land      | 7 Self-Rental      |
| 2 Multi-Family Residence  | 4 Commercial                 | 6 Royalties | 8 Other (describe) |

Income:	Properties:	A	B	C
<b>3</b> Rents received	<b>3</b>			
<b>4</b> Royalties received	<b>4</b>	21,441.		

**Expenses:**

<b>5</b> Advertising	<b>5</b>			
<b>6</b> Auto and travel (see instructions)	<b>6</b>			
<b>7</b> Cleaning and maintenance	<b>7</b>			
<b>8</b> Commissions	<b>8</b>			
<b>9</b> Insurance	<b>9</b>			
<b>10</b> Legal and other professional fees	<b>10</b>			
<b>11</b> Management fees	<b>11</b>			
<b>12</b> Mortgage interest paid to banks, etc. (see instructions)	<b>12</b>			
<b>13</b> Other interest	<b>13</b>			
<b>14</b> Repairs	<b>14</b>			
<b>15</b> Supplies	<b>15</b>			
<b>16</b> Taxes	<b>16</b>			
<b>17</b> Utilities	<b>17</b>			
<b>18</b> Depreciation expense or depletion	<b>18</b>			
<b>19</b> Other (list) ▶	<b>19</b>			
<b>20</b> Total expenses. Add lines 5 through 19	<b>20</b>			
<b>21</b> Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file <b>Form 6198</b>	<b>21</b>	21,441.		
<b>22</b> Deductible rental real estate loss after limitation, if any, on <b>Form 8582</b> (see instructions)	<b>22</b>			

<b>23a</b> Total of all amounts reported on line 3 for all rental properties	<b>23a</b>		
<b>b</b> Total of all amounts reported on line 4 for all royalty properties	<b>23b</b>	21,441.	
<b>c</b> Total of all amounts reported on line 12 for all properties	<b>23c</b>		
<b>d</b> Total of all amounts reported on line 18 for all properties	<b>23d</b>		
<b>e</b> Total of all amounts reported on line 20 for all properties	<b>23e</b>		
<b>24</b> <b>Income.</b> Add positive amounts shown on line 21. <b>Do not</b> include any losses	<b>24</b>	21,441.	
<b>25</b> <b>Losses.</b> Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here	<b>25</b>		
<b>26</b> <b>Total rental real estate and royalty income or (loss).</b> Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2	<b>26</b>	21,441.	

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Schedule E (Form 1040) 2020

Name(s) shown on return. Do not enter name and social security number if shown on page 1.

Your social security number

DANIEL J. SEAVEY

Caution: The IRS compares amounts reported on your tax return with amounts shown on Schedule(s) K-1.

**Part II** **Income or Loss From Partnerships and S Corporations** - Note: If you report a loss, receive a distribution, dispose of stock, or receive a loan repayment from an S corporation, you **must** check the box in column (e) on line 28 and attach the required basis computation. If you report a loss from an at-risk activity for which **any** amount is **not** at risk, you **must** check the box in column (f) on line 28 and attach **Form 6198**. See instructions.

27 Are you reporting any loss not allowed in a prior year due to the at-risk or basis limitations, a prior year unallowed loss from a passive activity (if that loss was not reported on Form 8582), or unreimbursed partnership expenses? If you answered "Yes," see instructions before completing this section ☐ Yes ☒ No

28	(a) Name	(b) Enter P for partnership; S for S corporation	(c) Check if foreign partnership	(d) Employer identification number	(e) Check if basis computation is required	(f) Check if any amount is not at risk
A	CV ENTERTAINMENT, LLC	P		84-2323416		
B						
C						
D						

Passive Income and Loss			Nonpassive Income and Loss		
(g) Passive loss allowed (attach Form 8582 if required)	(h) Passive income from Schedule K-1	(i) Nonpassive loss allowed (see Schedule K-1)	(j) Section 179 expense deduction from Form 4562	(k) Nonpassive income from Schedule K-1	
A				159,023.	
B					
C					
D					
29a Totals				159,023.	
b Totals					
30 Add columns (h) and (k) of line 29a				30	159,023.
31 Add columns (g), (i), and (j) of line 29b				31	( )
32 Total partnership and S corporation income or (loss). Combine lines 30 and 31				32	159,023.

**Part III** **Income or Loss From Estates and Trusts**

33		(a) Name		(b) Employer identification number	
A					
B					
Passive Income and Loss				Nonpassive Income and Loss	
(c) Passive deduction or loss allowed (attach Form 8582 if required)		(d) Passive income from Schedule K-1		(e) Deduction or loss from Schedule K-1	(f) Other income from Schedule K-1
A					
B					
34a	Totals				
b	Totals				
35	Add columns (d) and (f) of line 34a				35
36	Add columns (c) and (e) of line 34b				36 (
37	Total estate and trust income or (loss). Combine lines 35 and 36				37

**Part IV** **Income or Loss From Real Estate Mortgage Investment Conduits (REMICs) - Residual Holder**

38	(a) Name	(b) Employer identification number	(c) Excess inclusion from Schedules Q, line 2c (see instructions)	(d) Taxable income (net loss) from Schedules Q, line 1b	(e) Income from Schedules Q, line 3b
39	Combine columns (d) and (e) only. Enter the result here and include in the total on line 41 below				39

**Part V** **Summary**

40	Net farm rental income or (loss) from Form 4835. Also, complete line 42 below	40	
41	Total income or (loss). Combine lines 26, 32, 37, 39, and 40. Enter the result here and on Schedule 1 (Form 1040), line 5	41	180,464.
42	Reconciliation of farming and fishing income. Enter your gross farming and fishing income reported on Form 4835, line 7; Schedule K-1 (Form 1065), box 14, code B; Schedule K-1 (Form 1120-S), box 17, code AD; and Schedule K-1 (Form 1041), box 14, code F. See instructions.	42	
43	Reconciliation for real estate professionals. If you were a real estate professional (see instructions), enter the net income or (loss) you reported anywhere on Form 1040, Form 1040-SR, or Form 1040-NR from all rental real estate activities in which you materially participated under the passive activity loss rules	43	

INCOME FROM PASSTHROUGH STATEMENT, PAGE 1

2020

**SCHEDULE E**

Name DANIEL J. SEAVEY

SSN/EIN \_\_\_\_\_

Passthrough CV ENTERTAINMENT, LLC

ID 84-2323416

TAXPAYER

PARTNERSHIP

NONPASSIVE	K-1 Input	Prior Year Unallowed Basis Loss	Disallowed Due to Basis Limitation	Prior Year Unallowed At-Risk Loss	Disallowed Due to At-Risk	Prior Year Passive Loss	Disallowed Passive Loss	Tax Return
<b>SCHEDULE E, PAGE 2</b>								
Ordinary business income (loss) .....	156,724.							
Rental real estate income (loss) .....								
Other net rental income (loss) .....								
Intangible drilling costs/dry hole costs								
Self-charged passive interest expense								
Guaranteed payments .....	2,299.							
Section 179 and carryover .....								
Disallowed section 179 expense .....								
Excess farm loss .....								
Net income (loss) .....	159,023.							159,023.
First passive other .....								
Second passive other .....								
Cost depletion .....								
Percentage depletion .....								
Depletion carryover .....								
Disallowed due to 65% limitation .....								
Unreimbursed expenses (nonpassive)								
Nonpassive other .....								
Total Schedule E (page 2) .....	159,023.							159,023.
<b>FORM 4797</b>								
Section 1231 gain (loss) .....								
Section 179 recapture on disposition								
<b>SCHEDULE D</b>								
Net short-term cap. gain (loss) .....								
Net long-term cap. gain (loss) .....								
Section 1256 contracts & straddles ...								
<b>FORM 4952</b>								
Investment interest expense - Sch. A								
Other net investment income .....								
<b>ITEMIZED DEDUCTIONS</b>								
Charitable contributions .....								
Deductions related to portfolio income								
Other .....								

INCOME FROM PASSTHROUGH STATEMENT, PAGE 2

2020

**SCHEDULE E**

Name DANIEL J. SEAVEY

SSN/EIN \_\_\_\_\_

Passthrough CV ENTERTAINMENT, LLC

ID 84-2323416

TAXPAYER

PARTNERSHIP

NONPASSIVE	K-1 Input	Prior Year Unallowed Basis Loss	Disallowed Due to Basis Limitation	Prior Year Unallowed At-Risk Loss	Disallowed Due to At-Risk	Prior Year Passive Loss	Disallowed Passive Loss	Tax Return
<b>INTEREST AND DIVIDENDS</b>								
Interest income .....								
Interest from U.S. bonds .....								
Ordinary dividends .....								
Qualified dividends .....								
Tax-exempt interest income .....								
<b>FORM 6251</b>								
Depreciation adjustment after 12/31/86								
Adjusted gain or loss .....								
Beneficiary's AMT adjustment .....								
Depletion (other than oil) .....								
Other .....								
<b>MISCELLANEOUS</b>								
Self-employment earnings (loss)/Wages	159,023.							159,023.
Gross farming & fishing inc .....								
Royalties .....								
Royalty expenses/depletion .....								
Undistributed capital gains credit .....								
Backup withholding .....								
Credit for estimated tax .....								
Cancellation of debt .....								
Medical insurance - 1040 .....	2,299.							2,299.
Dependent care benefits .....								
Retirement plans .....								
Passthrough adjustment to Form 1040								
Penalty on early withdrawal of savings								
NOL .....								
Other taxes/recapture of credits .....								
Credits .....								
Casualty and theft loss .....								
<b>FORM 8995</b>								
Qualified business income .....								
Qualified service income .....								
Section 199A W-2 wages .....								
Section 199A unadjusted basis .....	114,131.							114,131.

**SCHEDULE SE**  
**(Form 1040)**Department of the Treasury  
Internal Revenue Service (99)**Self-Employment Tax**

OMB No. 1545-0074

**2020**  
Attachment  
Sequence No. **17**▶ Go to [www.irs.gov/ScheduleSE](http://www.irs.gov/ScheduleSE) for instructions and the latest information.

▶ Attach to Form 1040, 1040-SR, or 1040-NR.

Name of person with self-employment income (as shown on Form 1040, 1040-SR, or 1040-NR)

**DANIEL J. SEAVEY**

Social security number of person

with self-employment income ▶

**Part I Self-Employment Tax****Note:** If your only income subject to self-employment tax is **church employee income**, see instructions for how to report your income and the definition of church employee income.**A** If you are a minister, member of a religious order, or Christian Science practitioner **and** you filed Form 4361, but you had \$400 or more of **other** net earnings from self-employment, check here and continue with Part I ▶ ☐

Skip lines 1a and 1b if you use the farm optional method in Part II. See instructions.

<b>1a</b> Net farm profit or (loss) from Sch. F, line 34, and farm partnerships, Sch. K-1 (Form 1065), box 14, code A ... If you received social security retirement or disability benefits, enter the amount of Conservation Reserve	<b>1a</b>	
<b>b</b> Program payments included on Schedule F, line 4b, or listed on Schedule K-1 (Form 1065), box 20, code AH	<b>1b</b>	
Skip line 2 if you use the nonfarm optional method in Part II. See instructions.		
<b>2</b> Net profit or (loss) from Schedule C, line 31; and Schedule K-1 (Form 1065), box 14, code A (other than farming). See instructions for other income to report or if you are a minister or member of a religious order <b>SEE STATEMENT 14</b>	<b>2</b>	159,023.
<b>3</b> Combine lines 1a, 1b, and 2	<b>3</b>	159,023.
<b>4a</b> If line 3 is more than zero, multiply line 3 by 92.35% (0.9235). Otherwise, enter amount from line 3	<b>4a</b>	146,858.
<b>Note:</b> If line 4a is less than \$400 due to Conservation Reserve Program payments on line 1b, see instructions		
<b>b</b> If you elect one or both of the optional methods, enter the total of lines 15 and 17 here	<b>4b</b>	
<b>c</b> Combine lines 4a and 4b. If less than \$400, <b>stop</b> ; you don't owe self-employment tax. <b>Exception:</b> If less than \$400 and you had <b>church employee income</b> , enter -0- and continue ▶	<b>4c</b>	146,858.
<b>5a</b> Enter your <b>church employee income</b> from Form W-2. See instructions for definition of church employee income	<b>5a</b>	
<b>b</b> Multiply line 5a by 92.35% (0.9235). If less than \$100, enter -0-	<b>5b</b>	
<b>6</b> Add lines 4c and 5b	<b>6</b>	146,858.
<b>7</b> Maximum amount of combined wages and self-employment earnings subject to social security tax or the 6.2% portion of the 7.65% railroad retirement (tier 1) tax for 2020	<b>7</b>	137,700
<b>8a</b> Total social security wages and tips (total of boxes 3 and 7 on Form(s) W-2) and railroad retirement (tier 1) compensation. If \$137,700 or more, skip lines 8b through 10, and go to line 11	<b>8a</b>	2,025.
<b>b</b> Unreported tips subject to social security tax from Form 4137, line 10	<b>8b</b>	
<b>c</b> Wages subject to social security tax from Form 8919, line 10	<b>8c</b>	
<b>d</b> Add lines 8a, 8b, and 8c	<b>8d</b>	2,025.
<b>9</b> Subtract line 8d from line 7. If zero or less, enter -0- here and on line 10 and go to line 11 ▶	<b>9</b>	135,675.
<b>10</b> Multiply the <b>smaller</b> of line 6 or line 9 by 12.4% (0.124)	<b>10</b>	16,824.
<b>11</b> Multiply line 6 by 2.9% (0.029)	<b>11</b>	4,259.
<b>12</b> <b>Self-employment tax.</b> Add lines 10 and 11. Enter here and on <b>Schedule 2 (Form 1040), line 4</b>	<b>12</b>	21,083.
<b>13</b> <b>Deduction for one-half of self-employment tax.</b> Multiply line 12 by 50% (0.50). Enter here and on <b>Schedule 1 (Form 1040), line 14</b>	<b>13</b>	10,542.

**Part II Optional Methods To Figure Net Earnings** (see instructions)**Farm Optional Method.** You may use this method **only** if (a) your gross farm income<sup>1</sup> wasn't more than \$8,460, or (b) your net farm profits<sup>2</sup> were less than \$6,107.

<b>14</b> Maximum income for optional methods	<b>14</b>	5,640
<b>15</b> Enter the <b>smaller</b> of: two-thirds (2/3) of gross farm income <sup>1</sup> (not less than zero) or \$5,640. Also, include this amount on line 4b above	<b>15</b>	

**Nonfarm Optional Method.** You may use this method **only** if (a) your net nonfarm profits<sup>3</sup> were less than \$6,107 and also less than 72.189% of your gross nonfarm income,<sup>4</sup> and (b) you had net earnings from self-employment of at least \$400 in 2 of the prior 3 years. **Caution:** You may use this method no more than five times.

<b>16</b> Subtract line 15 from line 14	<b>16</b>	
<b>17</b> Enter the <b>smaller</b> of: two-thirds (2/3) of gross nonfarm income <sup>4</sup> (not less than zero) or the amount on line 16. Also, include this amount on line 4b above	<b>17</b>	

<sup>1</sup> From Sch. F, line 9; and Sch. K-1 (Form 1065), box 14, code B.<sup>2</sup> From Sch. F, line 34; and Sch. K-1 (Form 1065), box 14, code A - minus the amount  
you would have entered on line 1b had you not used the optional method.<sup>3</sup> From Sch. C, line 31; and Sch. K-1 (Form 1065), box 14, code A.<sup>4</sup> From Sch. C, line 7; and Sch. K-1 (Form 1065), box 14, code C.

Schedule SE (Form 1040) 2020

Attachment Sequence No. 17

Page 2

**Part III Maximum Deferral of Self-Employment Tax Payments**

If line 4c is zero, skip lines 18 through 20, and enter -0- on line 21.

<b>18</b>	Enter the portion of line 3 that can be attributed to March 27, 2020, through December 31, 2020 .....	<b>18</b>	0 .
<b>19</b>	If line 18 is more than zero, multiply line 18 by 92.35% (0.9235); otherwise, enter the amount from line 18 .....	<b>19</b>	0 .
<b>20</b>	Enter the portion of lines 15 and 17 that can be attributed to March 27, 2020, through December 31, 2020 .....	<b>20</b>	
<b>21</b>	Combine lines 19 and 20 .....	<b>21</b>	
If line 5b is zero, skip line 22 and enter -0- on line 23.			
<b>22</b>	Enter the portion of line 5a that can be attributed to March 27, 2020, through December 31, 2020 .....	<b>22</b>	
<b>23</b>	Multiply line 22 by 92.35% (0.9235) .....	<b>23</b>	
<b>24</b>	Add lines 21 and 23 .....	<b>24</b>	
<b>25</b>	Enter the smaller of line 9 or line 24 .....	<b>25</b>	
<b>26</b>	Multiply line 25 by 6.2% (0.062). Enter here and see the instructions for line 12e of Schedule 3 (Form 1040) .....	<b>26</b>	

024502 11-17-20

Schedule SE (Form 1040) 2020

## Foreign Tax Credit

OMB No. 1545-0121

Form

1116

Department of the Treasury  
Internal Revenue Service (99)

(Individual, Estate, or Trust)

▶ Attach to Form 1040, 1040-SR, 1040-NR, 1041, or 990-T.

▶ Go to [www.irs.gov/Form1116](http://www.irs.gov/Form1116) for instructions and the latest information.2020  
Attachment  
Sequence No. 19

Name Identifying number as shown on page 1 of your tax return

DANIEL J. SEAVEY

Use a separate Form 1116 for each category of income listed below. See *Categories of Income* in the instructions. Check only one box on each Form 1116. Report all amounts in U.S. dollars except where specified in Part II below.

- a ☐ Section 951A category income c ☒ Passive category income e ☐ Section 901(j) income g ☐ Lump-sum distributions  
b ☐ Foreign branch category income d ☐ General category income f ☐ Certain income re-sourced by treaty

h Resident of (name of country) ▶ UNITED STATES

**Note:** If you paid taxes to only one foreign country or U.S. possession, use column A in Part I and line A in Part II. If you paid taxes to more than one foreign country or U.S. possession, use a separate column and line for each country or possession.**Part I** Taxable Income or Loss From Sources Outside the United States (for category checked above)

		Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
		A	B	C	
i Enter the name of the foreign country or U.S. possession ▶ OTHER COUNTRIES HTKO					
1a Gross income from sources within country shown above and of the type checked above:		49.	-49.		1a
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) ▶ <input type="checkbox"/>					
<b>Deductions and losses (Caution: See instructions.):</b>					
2 Expenses <b>definitely related</b> to the income on line 1a (attach statement) .....					
3 Pro rata share of other deductions <b>not definitely related:</b>					
a Certain itemized deductions or standard deduction .....		10,000.			
b Other deductions (attach statement) .....					
c Add lines 3a and 3b .....		10,000.			
d Gross foreign source income .....		53.			
e Gross income from all sources .....		183,965.			
f Divide line 3d by line 3e .....		.000288098			
g Multiply line 3c by line 3f .....		3.			
4 Pro rata share of interest expense:					
a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions) .....					
b Other interest expense .....					
5 Losses from foreign sources .....					
6 Add lines 2, 3g, 4a, 4b, and 5 .....		3.	-3.		6
7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2 ▶					7

**Part II** Foreign Taxes Paid or Accrued

Country	Credit is claimed for taxes (you must check one) (j) <input checked="" type="checkbox"/> Paid (k) <input type="checkbox"/> Accrued	Foreign taxes paid or accrued										
		In foreign currency				In U.S. dollars						
		Taxes withheld at source on:			(p) Other foreign taxes paid or accrued	Taxes withheld at source on:			(t) Other foreign taxes paid or accrued	(u) Total foreign taxes paid or accrued (add cols. (q) through (t))		
		(l) Date paid or accrued	(m) Dividends	(n) Rents and royalties		(o) Interest		(q) Dividends			(r) Rents and royalties	(s) Interest
A	1099 TAX						21.				21.	
B												
C												
8 Add lines A through C, column (u). Enter the total here and on line 9, page 2 ▶											8	21.

LHA For Paperwork Reduction Act Notice, see instructions.

Form 1116 (2020)

Form 1116 (2020) **DANIEL J. SEAVEY**Page **2****Part III Figuring the Credit**

<b>9</b> Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I .....	<b>9</b>	21.	
<b>10</b> Carryback or carryover (attach detailed computation) .....	<b>10</b>		
(If your income was section 951A category income (box a above Part I), leave line 10 blank.)			
<b>11</b> Add lines 9 and 10 .....	<b>11</b>	21.	
<b>12</b> Reduction in foreign taxes .....	<b>12</b>		
<b>13</b> Taxes reclassified under high tax kickout .....	<b>13</b>	-21.	
<b>14</b> Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit .....	<b>14</b>		0.
<b>15</b> Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I .....	<b>15</b>		
<b>16</b> Adjustments to line 15 .....	<b>16</b>		
<b>17</b> Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 18 through 24. However, if you are filing more than one Form 1116, you must complete line 20.) .....	<b>17</b>		
<b>18</b> <b>Individuals:</b> Enter the amount from line 15 of your Form 1040, 1040-SR, or 1040-NR. <b>Estates and trusts:</b> Enter your taxable income without the deduction for your exemption .....	<b>18</b>		
<b>Caution:</b> If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.			
<b>19</b> Divide line 17 by line 18. If line 17 is more than line 18, enter "1" .....	<b>19</b>		
<b>20</b> <b>Individuals:</b> Enter the total of Form 1040 or 1040-SR, line 16, and Schedule 2 (Form 1040), line 2. If you are a nonresident alien, enter the total of Form 1040-NR, line 16 and Schedule 2 (Form 1040), line 2. <b>Estates and trusts:</b> Enter the amount from Form 1041, Schedule G, line 1a; or the total of Form 990-T, Part II, lines 2, 3, 4, and 6. Foreign estates and trusts should enter the amount from Form 1040-NR, line 16 .....	<b>20</b>		
<b>Caution:</b> If you are completing line 20 for separate category <b>g</b> (lump-sum distributions), see instructions.			
<b>21</b> Multiply line 20 by line 19 (maximum amount of credit) .....	<b>21</b>		
<b>22</b> Increase in limitation (section 960(c)) .....	<b>22</b>		
<b>23</b> Add lines 21 and 22 .....	<b>23</b>		
<b>24</b> Enter the <b>smaller</b> of line 14 or line 23. If this is the only Form 1116 you are filing, skip lines 25 through 32 and enter this amount on line 33. Otherwise, complete the appropriate line in Part IV .....	<b>24</b>		0.

**Part IV Summary of Credits From Separate Parts III**

<b>25</b> Credit for taxes on section 951A category income .....	<b>25</b>		
<b>26</b> Credit for taxes on foreign branch category income .....	<b>26</b>		
<b>27</b> Credit for taxes on passive category income .....	<b>27</b>		
<b>28</b> Credit for taxes on general category income .....	<b>28</b>	8.	
<b>29</b> Credit for taxes on section 901(j) income .....	<b>29</b>		
<b>30</b> Credit for taxes on certain income re-sourced by treaty .....	<b>30</b>		
<b>31</b> Credit for taxes on lump-sum distributions .....	<b>31</b>		
<b>32</b> Add lines 25 through 31 .....	<b>32</b>		8.
<b>33</b> Enter the <b>smaller</b> of line 20 or line 32 .....	<b>33</b>		8.
<b>34</b> Reduction of credit for international boycott operations .....	<b>34</b>		
<b>35</b> Subtract line 34 from line 33. This is your <b>foreign tax credit</b> . Enter here and on Schedule 3 (Form 1040), line 1; Form 1041, Schedule G, line 2a; or Form 990-T, Part III, line 1a .....	<b>35</b>		8.

Form **1116** (2020)



## Foreign Tax Credit

OMB No. 1545-0121

Form

1116

Department of the Treasury  
Internal Revenue Service (99)

(Individual, Estate, or Trust)

▶ Attach to Form 1040, 1040-SR, 1040-NR, 1041, or 990-T.

▶ Go to [www.irs.gov/Form1116](http://www.irs.gov/Form1116) for instructions and the latest information.2020  
Attachment  
Sequence No. 19

Name Identifying number as shown on page 1 of your tax return

DANIEL J. SEAVEY

Use a separate Form 1116 for each category of income listed below. See *Categories of Income* in the instructions. Check only one box on each Form 1116. Report all amounts in U.S. dollars except where specified in Part II below.

- a ☐ Section 951A category income c ☐ Passive category income e ☐ Section 901(j) income g ☐ Lump-sum distributions  
 b ☐ Foreign branch category income d ☒ General category income f ☐ Certain income re-sourced by treaty

h Resident of (name of country) ▶ UNITED STATES

**Note:** If you paid taxes to only one foreign country or U.S. possession, use column A in Part I and line A in Part II. If you paid taxes to more than one foreign country or U.S. possession, use a separate column and line for each country or possession.**Part I** Taxable Income or Loss From Sources Outside the United States (for category checked above)

	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	A	B	C	
i Enter the name of the foreign country or U.S. possession ▶ HTKO				
1a Gross income from sources within country shown above and of the type checked above:				
	49.			1a 49.
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) ▶ <input type="checkbox"/>				
<b>Deductions and losses (Caution: See instructions.):</b>				
2 Expenses <b>definitely related</b> to the income on line 1a (attach statement) .....				
3 Pro rata share of other deductions <b>not definitely related</b> :				
a Certain itemized deductions or standard deduction .....				
b Other deductions (attach statement) .....				
c Add lines 3a and 3b .....				
d Gross foreign source income .....				
e Gross income from all sources .....				
f Divide line 3d by line 3e .....				
g Multiply line 3c by line 3f .....				
4 Pro rata share of interest expense:				
a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions) .....				
b Other interest expense .....				
5 Losses from foreign sources .....				
6 Add lines 2, 3g, 4a, 4b, and 5 .....	3.			6 3.
7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2 ▶				7 46.

**Part II** Foreign Taxes Paid or Accrued

Country	Credit is claimed for taxes (you must check one) (j) <input checked="" type="checkbox"/> Paid (k) <input type="checkbox"/> Accrued	Foreign taxes paid or accrued									
		In foreign currency				In U.S. dollars					
		Taxes withheld at source on:			(p) Other foreign taxes paid or accrued	Taxes withheld at source on:			(t) Other foreign taxes paid or accrued	(u) Total foreign taxes paid or accrued (add cols. (q) through (t))	
		(l) Date paid or accrued	(m) Dividends	(n) Rents and royalties		(o) Interest		(q) Dividends			(r) Rents and royalties
A											
B											
C											
8 Add lines A through C, column (u). Enter the total here and on line 9, page 2 ▶											8

LHA For Paperwork Reduction Act Notice, see instructions.

Form 1116 (2020)

Form 1116 (2020) **DANIEL J. SEAVEY**Page **2****Part III Figuring the Credit**

<b>9</b> Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I .....	<b>9</b>		
<b>10</b> Carryback or carryover (attach detailed computation) ..... (If your income was section 951A category income (box a above Part I), leave line 10 blank.)	<b>10</b>		
<b>11</b> Add lines 9 and 10 .....	<b>11</b>		
<b>12</b> Reduction in foreign taxes .....	<b>12</b>		
<b>13</b> Taxes reclassified under high tax kickout .....	<b>13</b>	21.	
<b>14</b> Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit .....	<b>14</b>		21.
<b>15</b> Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I .....	<b>15</b>	46.	
<b>16</b> Adjustments to line 15 .....	<b>16</b>		
<b>17</b> Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 18 through 24. However, if you are filing more than one Form 1116, you must complete line 20.) .....	<b>17</b>	46.	
<b>18</b> <b>Individuals:</b> Enter the amount from line 15 of your Form 1040, 1040-SR, or 1040-NR. <b>Estates and trusts:</b> Enter your taxable income without the deduction for your exemption .....	<b>18</b>	105,898.	
<b>Caution:</b> If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.			
<b>19</b> Divide line 17 by line 18. If line 17 is more than line 18, enter "1" .....	<b>19</b>		.00043
<b>20</b> <b>Individuals:</b> Enter the total of Form 1040 or 1040-SR, line 16, and Schedule 2 (Form 1040), line 2. If you are a nonresident alien, enter the total of Form 1040-NR, line 16 and Schedule 2 (Form 1040), line 2. <b>Estates and trusts:</b> Enter the amount from Form 1041, Schedule G, line 1a; or the total of Form 990-T, Part II, lines 2, 3, 4, and 6. Foreign estates and trusts should enter the amount from Form 1040-NR, line 16 .....	<b>20</b>		19,445.
<b>Caution:</b> If you are completing line 20 for separate category <b>g</b> (lump-sum distributions), see instructions.			
<b>21</b> Multiply line 20 by line 19 (maximum amount of credit) .....	<b>21</b>		8.
<b>22</b> Increase in limitation (section 960(c)) .....	<b>22</b>		
<b>23</b> Add lines 21 and 22 .....	<b>23</b>		8.
<b>24</b> Enter the <b>smaller</b> of line 14 or line 23. If this is the only Form 1116 you are filing, skip lines 25 through 32 and enter this amount on line 33. Otherwise, complete the appropriate line in Part IV .....	<b>24</b>		8.

**Part IV Summary of Credits From Separate Parts III**

<b>25</b> Credit for taxes on section 951A category income .....	<b>25</b>		
<b>26</b> Credit for taxes on foreign branch category income .....	<b>26</b>		
<b>27</b> Credit for taxes on passive category income .....	<b>27</b>		
<b>28</b> Credit for taxes on general category income .....	<b>28</b>		
<b>29</b> Credit for taxes on section 901(j) income .....	<b>29</b>		
<b>30</b> Credit for taxes on certain income re-sourced by treaty .....	<b>30</b>		
<b>31</b> Credit for taxes on lump-sum distributions .....	<b>31</b>		
<b>32</b> Add lines 25 through 31 .....	<b>32</b>		
<b>33</b> Enter the <b>smaller</b> of line 20 or line 32 .....	<b>33</b>		
<b>34</b> Reduction of credit for international boycott operations .....	<b>34</b>		
<b>35</b> Subtract line 34 from line 33. This is your <b>foreign tax credit</b> . Enter here and on Schedule 3 (Form 1040), line 1; Form 1041, Schedule G, line 2a; or Form 990-T, Part III, line 1a .....	<b>35</b>		

Form **1116** (2020)

## Alternative Minimum Tax - Individuals

OMB No. 1545-0074

Form **6251**Department of the Treasury  
Internal Revenue Service (99)▶ Go to [www.irs.gov/Form6251](http://www.irs.gov/Form6251) for instructions and the latest information.

▶ Attach to Form 1040, 1040-SR, or 1040-NR.

**2020**  
Attachment  
Sequence No. **32**

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

Your social security number

**DANIEL J. SEAVEY****Part I Alternative Minimum Taxable Income**

<b>1</b>	Enter the amount from Form 1040 or 1040-SR, line 15, if more than zero. If Form 1040 or 1040-SR, line 15, is zero, subtract lines 12 and 13 of Form 1040 or 1040-SR from line 11 of Form 1040 or 1040-SR and enter the result here. (If less than zero, enter as a negative amount.)	<b>1</b>	<b>105,898.</b>
<b>2a</b>	If filing Schedule A (Form 1040), enter the taxes from Schedule A, line 7; otherwise, enter the amount from Form 1040 or 1040-SR, line 12	<b>2a</b>	<b>10,000.</b>
<b>b</b>	Tax refund from Schedule 1 (Form 1040), line 1 or line 8	<b>2b</b>	
<b>c</b>	Investment interest expense (difference between regular tax and AMT)	<b>2c</b>	
<b>d</b>	Depletion (difference between regular tax and AMT)	<b>2d</b>	
<b>e</b>	Net operating loss deduction from Schedule 1 (Form 1040), line 8. Enter as a positive amount	<b>2e</b>	
<b>f</b>	Alternative tax net operating loss deduction	<b>2f</b>	
<b>g</b>	Interest from specified private activity bonds exempt from the regular tax	<b>2g</b>	
<b>h</b>	Qualified small business stock, see instructions	<b>2h</b>	
<b>i</b>	Exercise of incentive stock options (excess of AMT income over regular tax income)	<b>2i</b>	
<b>j</b>	Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)	<b>2j</b>	
<b>k</b>	Disposition of property (difference between AMT and regular tax gain or loss)	<b>2k</b>	
<b>l</b>	Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)	<b>2l</b>	
<b>m</b>	Passive activities (difference between AMT and regular tax income or loss)	<b>2m</b>	
<b>n</b>	Loss limitations (difference between AMT and regular tax income or loss)	<b>2n</b>	
<b>o</b>	Circulation costs (difference between regular tax and AMT)	<b>2o</b>	
<b>p</b>	Long-term contracts (difference between AMT and regular tax income)	<b>2p</b>	
<b>q</b>	Mining costs (difference between regular tax and AMT)	<b>2q</b>	
<b>r</b>	Research and experimental costs (difference between regular tax and AMT)	<b>2r</b>	
<b>s</b>	Income from certain installment sales before January 1, 1987	<b>2s</b>	
<b>t</b>	Intangible drilling costs preference	<b>2t</b>	
<b>3</b>	Other adjustments, including income-based related adjustments	<b>3</b>	
<b>4</b>	<b>Alternative minimum taxable income.</b> Combine lines 1 through 3. (If married filing separately and line 4 is more than \$745,200, see instructions.)	<b>4</b>	<b>115,898.</b>

**Part II Alternative Minimum Tax (AMT)**

<b>5</b>	Exemption. <b>IF your filing status is ... AND line 4 is not over ... THEN enter on line 5 ...</b> Single or head of household ..... \$518,400 ..... \$72,900 Married filing jointly or qualifying widow(er) ... 1,036,800 ..... 113,400 Married filing separately ..... 518,400 ..... 56,700 If line 4 is <b>over</b> the amount shown above for your filing status, see instructions.	<b>5</b>	<b>72,900.</b>
<b>6</b>	Subtract line 5 from line 4. If more than zero, go to line 7. If zero or less, enter -0- here and on lines 7, 9, and 11, and go to line 10	<b>6</b>	<b>42,998.</b>
<b>7</b>	<ul style="list-style-type: none"> <li>If you are filing Form 2555, see instructions for the amount to enter.</li> <li>If you reported capital gain distributions directly on Form 1040 or 1040-SR, line 7; you reported qualified dividends on Form 1040 or 1040-SR, line 3a; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured for the AMT, if necessary), complete Part III on the back and enter the amount from line 40 here.</li> <li><b>All others:</b> If line 6 is \$197,900 or less (\$98,950 or less if married filing separately), multiply line 6 by 26% (0.26). Otherwise, multiply line 6 by 28% (0.28) and subtract \$3,958 (\$1,979 if married filing separately) from the result</li> </ul>	<b>7</b>	<b>11,118.</b>
<b>8</b>	Alternative minimum tax foreign tax credit (see instructions)	<b>8</b>	<b>5.</b>
<b>9</b>	Tentative minimum tax. Subtract line 8 from line 7	<b>9</b>	<b>11,113.</b>
<b>10</b>	Add Form 1040 or 1040-SR, line 16 (minus any tax from Form 4972), and Schedule 2 (Form 1040), line 2. Subtract from the result any foreign tax credit from Schedule 3 (Form 1040), line 1. If you used Schedule J to figure your tax on Form 1040 or 1040-SR, line 16, refigure that tax without using Schedule J before completing this line (see instructions)	<b>10</b>	<b>19,437.</b>
<b>11</b>	<b>AMT.</b> Subtract line 10 from line 9. If zero or less, enter -0-. Enter here and on Schedule 2 (Form 1040), line 1	<b>11</b>	<b>0.</b>

Form 6251 (2020)

DANIEL J. SEAVEY

Page 2

**Part III Tax Computation Using Maximum Capital Gains Rates**

Complete Part III only if you are required to do so by line 7 or by the Foreign Earned Income Tax Worksheet in the instructions.

<b>12</b> Enter the amount from Form 6251, line 6. If you are filing Form 2555, enter the amount from line 3 of the worksheet in the instructions for line 7 .....	<b>12</b>	42,998.
<b>13</b> Enter the amount from line 4 of the Qualified Dividends and Capital Gain Tax Worksheet in the Instructions for Forms 1040 and 1040-SR or the amount from line 13 of the Schedule D Tax Worksheet in the Instructions for Schedule D (Form 1040), whichever applies (as refigured for the AMT, if necessary) (see instructions). If you are filing Form 2555, see instructions for the amount to enter .....	<b>13</b>	564.
<b>14</b> Enter the amount from Schedule D (Form 1040), line 19 (as refigured for the AMT, if necessary) (see instructions). If you are filing Form 2555, see instructions for the amount to enter .....	<b>14</b>	
<b>15</b> If you did not complete a Schedule D Tax Worksheet for the regular tax or the AMT, enter the amount from line 13. Otherwise, add lines 13 and 14, and enter the <b>smaller</b> of that result or the amount from line 10 of the Schedule D Tax Worksheet (as refigured for the AMT, if necessary). If you are filing Form 2555, see instructions for the amount to enter .....	<b>15</b>	564.
<b>16</b> Enter the <b>smaller</b> of line 12 or line 15 .....	<b>16</b>	564.
<b>17</b> Subtract line 16 from line 12 .....	<b>17</b>	42,434.
<b>18</b> If line 17 is \$197,900 or less (\$98,950 or less if married filing separately), multiply line 17 by 26% (0.26). Otherwise, multiply line 17 by 28% (0.28) and subtract \$3,958 (\$1,979 if married filing separately) from the result .....	<b>18</b>	11,033.
<b>19</b> Enter: • \$80,000 if married filing jointly or qualifying widow(er), • \$40,000 if single or married filing separately, or • \$53,600 if head of household. } .....	<b>19</b>	40,000.
<b>20</b> Enter the amount from line 5 of the Qualified Dividends and Capital Gain Tax Worksheet or the amount from line 14 of the Schedule D Tax Worksheet, whichever applies (as figured for the regular tax). If you did not complete either worksheet for the regular tax, enter the amount from Form 1040 or 1040-SR, line 15; if zero or less, enter -0-. If you are filing Form 2555, see instructions for the amount to enter .....	<b>20</b>	105,334.
<b>21</b> Subtract line 20 from line 19. If zero or less, enter -0- .....	<b>21</b>	0.
<b>22</b> Enter the <b>smaller</b> of line 12 or line 13 .....	<b>22</b>	564.
<b>23</b> Enter the <b>smaller</b> of line 21 or line 22. This amount is taxed at 0% .....	<b>23</b>	0.
<b>24</b> Subtract line 23 from line 22 .....	<b>24</b>	564.
<b>25</b> Enter: • \$441,450 if single • \$248,300 if married filing separately • \$496,600 if married filing jointly or qualifying widow(er) • \$469,050 if head of household } .....	<b>25</b>	441,450.
<b>26</b> Enter the amount from line 21 .....	<b>26</b>	0.
<b>27</b> Enter the amount from line 5 of the Qualified Dividends and Capital Gain Tax Worksheet or the amount from line 21 of the Schedule D Tax Worksheet, whichever applies (as figured for the regular tax). If you did not complete either worksheet for the regular tax, enter the amount from Form 1040 or 1040-SR, line 15; if zero or less, enter -0-. If you are filing Form 2555, see instructions for the amount to enter .....	<b>27</b>	105,334.
<b>28</b> Add line 26 and line 27 .....	<b>28</b>	105,334.
<b>29</b> Subtract line 28 from line 25. If zero or less, enter -0- .....	<b>29</b>	336,116.
<b>30</b> Enter the smaller of line 24 or line 29 .....	<b>30</b>	564.
<b>31</b> Multiply line 30 by 15% (0.15) .....	<b>31</b>	85.
<b>32</b> Add lines 23 and 30 .....	<b>32</b>	564.
<b>If lines 32 and 12 are the same, skip lines 33 through 37 and go to line 38. Otherwise, go to line 33.</b>		
<b>33</b> Subtract line 32 from line 22 .....	<b>33</b>	0.
<b>34</b> Multiply line 33 by 20% (0.20) .....	<b>34</b>	
<b>If line 14 is zero or blank, skip lines 35 through 37 and go to line 38. Otherwise, go to line 35.</b>		
<b>35</b> Add lines 17, 32, and 33 .....	<b>35</b>	
<b>36</b> Subtract line 35 from line 12 .....	<b>36</b>	
<b>37</b> Multiply line 36 by 25% (0.25) .....	<b>37</b>	
<b>38</b> Add lines 18, 31, 34, and 37 .....	<b>38</b>	11,118.
<b>39</b> If line 12 is \$197,900 or less (\$98,950 or less if married filing separately), multiply line 12 by 26% (0.26). Otherwise, multiply line 12 by 28% (0.28) and subtract \$3,958 (\$1,979 if married filing separately) from the result .....	<b>39</b>	11,179.
<b>40</b> Enter the <b>smaller</b> of line 38 or line 39 here and on line 7. If you are filing Form 2555, do not enter this amount on line 7. Instead, enter it on line 4 of the worksheet in the instructions for line 7 .....	<b>40</b>	11,118.

## Foreign Tax Credit

OMB No. 1545-0121

Form

1116

Department of the Treasury  
Internal Revenue Service (99)

(Individual, Estate, or Trust)

▶ Attach to Form 1040, 1040-SR, 1040-NR, 1041, or 990-T.

▶ Go to [www.irs.gov/Form1116](http://www.irs.gov/Form1116) for instructions and the latest information.

2020

Attachment  
Sequence No. 19

Name Identifying number as shown on page 1 of your tax return

DANIEL J. SEAVEY

Use a separate Form 1116 for each category of income listed below. See *Categories of Income* in the instructions. Check only one box on each Form 1116. Report all amounts in U.S. dollars except where specified in Part II below.

- a ☐ Section 951A category income c ☒ Passive category income e ☐ Section 901(j) income g ☐ Lump-sum distributions  
 b ☐ Foreign branch category income d ☐ General category income f ☐ Certain income re-sourced by treaty

h Resident of (name of country) ▶ UNITED STATES

**Note:** If you paid taxes to only one foreign country or U.S. possession, use column A in Part I and line A in Part II. If you paid taxes to more than one foreign country or U.S. possession, use a separate column and line for each country or possession.**Part I** Taxable Income or Loss From Sources Outside the United States (for category checked above)

	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	A	B	C	
i Enter the name of the foreign country or U.S. possession ▶	OTHER COUNTRIES	HTKO		
1a Gross income from sources within country shown above and of the type checked above:	49.	-49.		1a
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) ▶ <input type="checkbox"/>				
<b>Deductions and losses (Caution: See instructions.):</b>				
2 Expenses <b>definitely related</b> to the income on line 1a (attach statement) .....				
3 Pro rata share of other deductions <b>not definitely related:</b>				
a Certain itemized deductions or standard deduction .....				
b Other deductions (attach statement) .....				
c Add lines 3a and 3b .....				
d Gross foreign source income .....	53.			
e Gross income from all sources .....	183,965.			
f Divide line 3d by line 3e .....	.000288098			
g Multiply line 3c by line 3f .....				
4 Pro rata share of interest expense:				
a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions) .....				
b Other interest expense .....				
5 Losses from foreign sources .....				
6 Add lines 2, 3g, 4a, 4b, and 5 .....		0.		6
7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2 ▶				7

**Part II** Foreign Taxes Paid or Accrued

Country	Credit is claimed for taxes (you must check one) (j) <input checked="" type="checkbox"/> Paid (k) <input type="checkbox"/> Accrued	Foreign taxes paid or accrued										
		In foreign currency				In U.S. dollars						
		Taxes withheld at source on:			(p) Other foreign taxes paid or accrued	Taxes withheld at source on:			(t) Other foreign taxes paid or accrued	(u) Total foreign taxes paid or accrued (add cols. (q) through (t))		
		(l) Date paid or accrued	(m) Dividends	(n) Rents and royalties		(o) Interest		(q) Dividends			(r) Rents and royalties	(s) Interest
A	1099 TAX						21.				21.	
B												
C												
8 Add lines A through C, column (u). Enter the total here and on line 9, page 2 ▶											8	21.

LHA For Paperwork Reduction Act Notice, see instructions.

Form 1116 (2020)

Form 1116 (2020) **DANIEL J. SEAVEY**Page **2****Part III Figuring the Credit**

<b>9</b> Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I .....	<b>9</b>	21.	
<b>10</b> Carryback or carryover (attach detailed computation) .....	<b>10</b>		
(If your income was section 951A category income (box a above Part I), leave line 10 blank.)			
<b>11</b> Add lines 9 and 10 .....	<b>11</b>	21.	
<b>12</b> Reduction in foreign taxes .....	<b>12</b>		
<b>13</b> Taxes reclassified under high tax kickout .....	<b>13</b>	-21.	
<b>14</b> Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit .....	<b>14</b>		0.
<b>15</b> Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I .....	<b>15</b>		
<b>16</b> Adjustments to line 15 .....	<b>16</b>		
<b>17</b> Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 18 through 24. However, if you are filing more than one Form 1116, you must complete line 20.) .....	<b>17</b>		
<b>18</b> <b>Individuals:</b> Enter the amount from line 15 of your Form 1040, 1040-SR, or 1040-NR. <b>Estates and trusts:</b> Enter your taxable income without the deduction for your exemption .....	<b>18</b>		
<b>Caution:</b> If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.			
<b>19</b> Divide line 17 by line 18. If line 17 is more than line 18, enter "1" .....	<b>19</b>		
<b>20</b> <b>Individuals:</b> Enter the total of Form 1040 or 1040-SR, line 16, and Schedule 2 (Form 1040), line 2. If you are a nonresident alien, enter the total of Form 1040-NR, line 16 and Schedule 2 (Form 1040), line 2. <b>Estates and trusts:</b> Enter the amount from Form 1041, Schedule G, line 1a; or the total of Form 990-T, Part II, lines 2, 3, 4, and 6. Foreign estates and trusts should enter the amount from Form 1040-NR, line 16 .....	<b>20</b>		11,118.
<b>Caution:</b> If you are completing line 20 for separate category <b>g</b> (lump-sum distributions), see instructions.			
<b>21</b> Multiply line 20 by line 19 (maximum amount of credit) .....	<b>21</b>		
<b>22</b> Increase in limitation (section 960(c)) .....	<b>22</b>		
<b>23</b> Add lines 21 and 22 .....	<b>23</b>		
<b>24</b> Enter the <b>smaller</b> of line 14 or line 23. If this is the only Form 1116 you are filing, skip lines 25 through 32 and enter this amount on line 33. Otherwise, complete the appropriate line in Part IV .....	<b>24</b>		0.

**Part IV Summary of Credits From Separate Parts III**

<b>25</b> Credit for taxes on section 951A category income .....	<b>25</b>		
<b>26</b> Credit for taxes on foreign branch category income .....	<b>26</b>		
<b>27</b> Credit for taxes on passive category income .....	<b>27</b>		
<b>28</b> Credit for taxes on general category income .....	<b>28</b>	5.	
<b>29</b> Credit for taxes on section 901(j) income .....	<b>29</b>		
<b>30</b> Credit for taxes on certain income re-sourced by treaty .....	<b>30</b>		
<b>31</b> Credit for taxes on lump-sum distributions .....	<b>31</b>		
<b>32</b> Add lines 25 through 31 .....	<b>32</b>		5.
<b>33</b> Enter the <b>smaller</b> of line 20 or line 32 .....	<b>33</b>		5.
<b>34</b> Reduction of credit for international boycott operations .....	<b>34</b>		
<b>35</b> Subtract line 34 from line 33. This is your <b>foreign tax credit</b> . Enter here and on Schedule 3 (Form 1040), line 1; Form 1041, Schedule G, line 2a; or Form 990-T, Part III, line 1a .....	<b>35</b>		5.

Form **1116** (2020)

## Foreign Tax Credit

OMB No. 1545-0121

Form

1116

Department of the Treasury  
Internal Revenue Service (99)

(Individual, Estate, or Trust)

▶ Attach to Form 1040, 1040-SR, 1040-NR, 1041, or 990-T.

▶ Go to [www.irs.gov/Form1116](http://www.irs.gov/Form1116) for instructions and the latest information.2020  
Attachment  
Sequence No. 19

Name Identifying number as shown on page 1 of your tax return

DANIEL J. SEAVEY

Use a separate Form 1116 for each category of income listed below. See *Categories of Income* in the instructions. Check only one box on each Form 1116. Report all amounts in U.S. dollars except where specified in Part II below.

- a ☐ Section 951A category income c ☐ Passive category income e ☐ Section 901(j) income g ☐ Lump-sum distributions  
 b ☐ Foreign branch category income d ☒ General category income f ☐ Certain income re-sourced by treaty

h Resident of (name of country) ▶ UNITED STATES

**Note:** If you paid taxes to only one foreign country or U.S. possession, use column A in Part I and line A in Part II. If you paid taxes to more than one foreign country or U.S. possession, use a separate column and line for each country or possession.**Part I** Taxable Income or Loss From Sources Outside the United States (for category checked above)

	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	A	B	C	
i Enter the name of the foreign country or U.S. possession ▶ HTKO				
1a Gross income from sources within country shown above and of the type checked above:	49.			1a 49.
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) ▶ <input type="checkbox"/>				
<b>Deductions and losses (Caution: See instructions.):</b>				
2 Expenses <b>definitely related</b> to the income on line 1a (attach statement) .....				
3 Pro rata share of other deductions <b>not definitely related:</b>				
a Certain itemized deductions or standard deduction .....				
b Other deductions (attach statement) .....				
c Add lines 3a and 3b .....				
d Gross foreign source income .....				
e Gross income from all sources .....				
f Divide line 3d by line 3e .....				
g Multiply line 3c by line 3f .....				
4 Pro rata share of interest expense:				
a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions) .....				
b Other interest expense .....				
5 Losses from foreign sources .....				
6 Add lines 2, 3g, 4a, 4b, and 5 .....	0.			6
7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2 ▶				7 49.

**Part II** Foreign Taxes Paid or Accrued

Country	Credit is claimed for taxes (you must check one) (j) <input checked="" type="checkbox"/> Paid (k) <input type="checkbox"/> Accrued	Foreign taxes paid or accrued									
		In foreign currency				In U.S. dollars					
		Taxes withheld at source on:			(p) Other foreign taxes paid or accrued	Taxes withheld at source on:			(t) Other foreign taxes paid or accrued	(u) Total foreign taxes paid or accrued (add cols. (q) through (t))	
		(l) Date paid or accrued	(m) Dividends	(n) Rents and royalties		(o) Interest		(q) Dividends			(r) Rents and royalties
A											
B											
C											
8 Add lines A through C, column (u). Enter the total here and on line 9, page 2 ▶											8

LHA For Paperwork Reduction Act Notice, see instructions.

Form 1116 (2020)

Form 1116 (2020) **DANIEL J. SEAVEY**Page **2****Part III Figuring the Credit**

<b>9</b> Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I .....	<b>9</b>		
<b>10</b> Carryback or carryover (attach detailed computation) ..... (If your income was section 951A category income (box a above Part I), leave line 10 blank.)	<b>10</b>		
<b>11</b> Add lines 9 and 10 .....	<b>11</b>		
<b>12</b> Reduction in foreign taxes .....	<b>12</b>		
<b>13</b> Taxes reclassified under high tax kickout .....	<b>13</b>		<b>21.</b>
<b>14</b> Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit .....	<b>14</b>		<b>21.</b>
<b>15</b> Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I .....	<b>15</b>		<b>49.</b>
<b>16</b> Adjustments to line 15 .....	<b>16</b>		
<b>17</b> Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 18 through 24. However, if you are filing more than one Form 1116, you must complete line 20.) .....	<b>17</b>		<b>49.</b>
<b>18</b> <b>Individuals:</b> Enter the amount from line 15 of your Form 1040, 1040-SR, or 1040-NR. <b>Estates and trusts:</b> Enter your taxable income without the deduction for your exemption .....	<b>18</b>		<b>115,898.</b>
<b>Caution:</b> If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.			
<b>19</b> Divide line 17 by line 18. If line 17 is more than line 18, enter "1" .....	<b>19</b>		<b>.00042</b>
<b>20</b> <b>Individuals:</b> Enter the total of Form 1040 or 1040-SR, line 16, and Schedule 2 (Form 1040), line 2. If you are a nonresident alien, enter the total of Form 1040-NR, line 16 and Schedule 2 (Form 1040), line 2. <b>Estates and trusts:</b> Enter the amount from Form 1041, Schedule G, line 1a; or the total of Form 990-T, Part II, lines 2, 3, 4, and 6. Foreign estates and trusts should enter the amount from Form 1040-NR, line 16 .....	<b>20</b>		<b>11,118.</b>
<b>Caution:</b> If you are completing line 20 for separate category <b>g</b> (lump-sum distributions), see instructions.			
<b>21</b> Multiply line 20 by line 19 (maximum amount of credit) .....	<b>21</b>		<b>5.</b>
<b>22</b> Increase in limitation (section 960(c)) .....	<b>22</b>		
<b>23</b> Add lines 21 and 22 .....	<b>23</b>		<b>5.</b>
<b>24</b> Enter the <b>smaller</b> of line 14 or line 23. If this is the only Form 1116 you are filing, skip lines 25 through 32 and enter this amount on line 33. Otherwise, complete the appropriate line in Part IV .....	<b>24</b>		<b>5.</b>

**Part IV Summary of Credits From Separate Parts III**

<b>25</b> Credit for taxes on section 951A category income .....	<b>25</b>		
<b>26</b> Credit for taxes on foreign branch category income .....	<b>26</b>		
<b>27</b> Credit for taxes on passive category income .....	<b>27</b>		
<b>28</b> Credit for taxes on general category income .....	<b>28</b>		
<b>29</b> Credit for taxes on section 901(j) income .....	<b>29</b>		
<b>30</b> Credit for taxes on certain income re-sourced by treaty .....	<b>30</b>		
<b>31</b> Credit for taxes on lump-sum distributions .....	<b>31</b>		
<b>32</b> Add lines 25 through 31 .....	<b>32</b>		
<b>33</b> Enter the <b>smaller</b> of line 20 or line 32 .....	<b>33</b>		
<b>34</b> Reduction of credit for international boycott operations .....	<b>34</b>		
<b>35</b> Subtract line 34 from line 33. This is your <b>foreign tax credit</b> . Enter here and on Schedule 3 (Form 1040), line 1; Form 1041, Schedule G, line 2a; or Form 990-T, Part III, line 1a .....	<b>35</b>		

Form **1116** (2020)



Form **8995****Qualified Business Income Deduction  
Simplified Computation**

OMB No. 1545-2294

**2020**Attachment  
Sequence No. **55**Department of the Treasury  
Internal Revenue Service

▶ Attach to your tax return.

▶ Go to [www.irs.gov/Form8995](http://www.irs.gov/Form8995) for instructions and the latest information.

Name(s) shown on return

Your taxpayer identification number

**DANIEL J. SEAVEY**

**Note.** You can claim the qualified business income deduction **only** if you have qualified business income from a qualified trade or business, real estate investment trust dividends, publicly traded partnership income, or a domestic production activities deduction passed through from an agricultural or horticultural cooperative. See instructions.

Use this form if your taxable income, before your qualified business income deduction, is at or below \$163,300 (\$326,600 if married filing jointly), and you aren't a patron of an agricultural or horticultural cooperative.

1	(a) Trade, business, or aggregation name	(b) Taxpayer identification number	(c) Qualified business income or (loss)
i	CV ENTERTAINMENT, LLC	84-2323416	146,334.
ii			
iii			
iv			
v			
2	Total qualified business income or (loss). Combine lines 1i through 1v, column (c)	2	146,334.
3	Qualified business net (loss) carryforward from the prior year	3	( )
4	Total qualified business income. Combine lines 2 and 3. If zero or less, enter -0-	4	146,334.
5	Qualified business income component. Multiply line 4 by 20% (0.20)	5	29,267.
6	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss) (see instructions) <b>SEE STATEMENT 17</b>	6	25.
7	Qualified REIT dividends and qualified PTP (loss) carryforward from the prior year	7	( )
8	Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero or less, enter -0-	8	25.
9	REIT and PTP component. Multiply line 8 by 20% (0.20)	9	5.
10	Qualified business income deduction before the income limitation. Add lines 5 and 9	10	29,272.
11	Taxable income before qualified business income deduction	11	132,232.
12	Net capital gain (see instructions)	12	564.
13	Subtract line 12 from line 11. If zero or less, enter -0-	13	131,668.
14	Income limitation. Multiply line 13 by 20% (0.20)	14	26,334.
15	Qualified business income deduction. Enter the lesser of line 10 or line 14. Also enter this amount on the applicable line of your return ▶	15	26,334.
16	Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than zero, enter -0-	16	( )
17	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 and 7. If greater than zero, enter -0-	17	( )

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form **8995** (2020)

Activity: CV ENTERTAINMENT, LLC

1.	Qualified business income before deductions .....	156,724.
2.	Deductible part of self-employment income:	
a.	Net income subject to self-employment tax from this activity .....	156,724.
b.	Total income subject to self-employment tax .....	159,023.
c.	Line 2a divided by line 2b (not greater than 1.000) .....	.985542972
d.	Amount from Schedule 1 (Form 1040), line 14 .....	10,542.
e.	Line 2c times line 2d. This is the allocated deductible part of self-employment tax for this activity .....	10,390.
3.	Self-employed SEP, SIMPLE and qualified plans:	
a.	Net income subject to self-employment tax from this activity .....	
b.	Net earnings from .....	
c.	Line 3a divided by line 3b (not greater than 1.000) .....	
d.	Amount from Schedule 1 (Form 1040), line 15 .....	
e.	Line 3c times line 3d. This is the allocated self-employed SEP, SIMPLE and qualified plans amount for this activity .....	
4.	Self-employed health insurance deduction:	
a.	Health insurance payments from this activity .....	
b.	Health insurance limits for activity above .....	
c.	Lesser of line 4a or line 4b .....	
d.	Reserved .....	
e.	Reserved .....	
f.	Amount from line 4c. This is the allocated SE health insurance deduction for this activity .....	
5.	Line 1 minus lines 2e, 3e and 4f. This is the qualified business income after deductions .....	146,334.

Activity:

1.	Qualified business income before deductions .....	
2.	Deductible part of self-employment income:	
a.	Net income subject to self-employment tax from this activity .....	
b.	Total income subject to self-employment tax .....	
c.	Line 2a divided by line 2b (not greater than 1.000) .....	
d.	Amount from Schedule 1 (Form 1040), line 14 .....	
e.	Line 2c times line 2d. This is the allocated deductible part of self-employment tax for this activity .....	
3.	Self-employed SEP, SIMPLE and qualified plans:	
a.	Net income subject to self-employment tax from this activity .....	
b.	Net earnings from .....	
c.	Line 3a divided by line 3b (not greater than 1.000) .....	
d.	Amount from Schedule 1 (Form 1040), line 15 .....	
e.	Line 3c times line 3d. This is the allocated self-employed SEP, SIMPLE and qualified plans amount for this activity .....	
4.	Self-employed health insurance deduction:	
a.	Health insurance payments from this activity .....	
b.	Health insurance limits for activity above .....	
c.	Lesser of line 4a or line 4b .....	
d.	Reserved .....	
e.	Reserved .....	
f.	Amount from line 4c. This is the allocated SE health insurance deduction for this activity .....	
5.	Line 1 minus lines 2e, 3e and 4f. This is the qualified business income after deductions .....	

**Form 1116**

**U.S. and Foreign Source Income Summary**

NAME

**DANIEL J. SEAVEY**

INCOME TYPE	TOTAL	U.S.	FOREIGN GENERAL
Compensation	2,025.	2,025.	
Dividends/Distributions <b>SEE STATEMENT 18</b>	1,088.	1,039.	49.
Interest			
Capital Gains	388.	384.	4.
Business/Profession			
Rent/Royalty	21,441.	21,441.	
State/Local Refunds			
Partnership/S Corporation	159,023.	159,023.	
Trust/Estate			
Other Income			
Gross Income	<u>183,965.</u>	<u>183,912.</u>	<u>53.</u>

Less:

Section 911 Exclusion			
Capital Losses	3,388.	3,384.	4.
Capital Gains Tax Adjustment			
Total Income - Form 1116	<u>180,577.</u>	<u>180,528.</u>	<u>49.</u>

Deductions:

Business/Profession Expenses			
Rent/Royalty Expenses			
Partnership/S Corporation Losses			
Trust/Estate Losses			
Capital Losses			
Non-capital Losses			
Individual Retirement Account			
Moving Expenses			
Self-employment Tax Deduction	10,542.	10,542.	
Self-employment Health Insurance	2,299.	2,299.	
Keogh Contributions			
Alimony			
Forfeited Interest			
Foreign Housing Deduction			
Charitable Deduction if taking Standard Deduction			
Other Adjustments			
Capital Gains Tax Adjustment			
Total Deductions	<u>12,841.</u>	<u>12,841.</u>	

Adjusted Gross Income	<u>167,736.</u>	<u>167,687.</u>	<u>49.</u>
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Less Itemized Deductions:

Specifically Allocated			
Home Mortgage Interest	25,504.	25,504.	
Other Interest			
Ratably Allocated	10,000.	9,997.	3.
Total Adjustments to Adjusted Gross Income	<u>35,504.</u>	<u>35,501.</u>	<u>3.</u>

Taxable Income	<u>132,232.</u>	<u>132,186.</u>	<u>46.</u>
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027931 01-20-21

**Form 1116**

**Allocation of Itemized Deductions**

NAME

**DANIEL J. SEAVEY**

	Total Itemized Deductions	Form 1116		
		Specifically U.S.	Specifically Foreign	Ratable
Medical/Dental .....				
Taxes .....	10,000.			10,000.
Interest - Not Including Investment Interest .....	25,504.	25,504.		
Investment Interest .....				
Contributions .....				
Casualty Losses .....				
Other Miscellaneous Deductions - Not Including Gambling Losses .....				
Gambling Losses .....				
Foreign Adjustment .....				
Total Itemized Deductions .....	35,504.	25,504.		10,000.

**Form 1116**

**Foreign Tax Credit Carryover Statement (Page 1 of 2)**

NAME

**DANIEL J. SEAVEY**

**Foreign Income Category**

**GENERAL LIMITATION INCOME**

**Regular**

	2015	2016	2017	2018	2019	2020
1. Foreign tax paid/accrued						21.
2. FTC carryback to 2020 for amended returns						
3. Reduction in foreign taxes						
4. Foreign tax available						21.
5. Maximum credit allowable						8.
6. Unused foreign tax ( + ) or excess of limit ( - )						13.
7. Foreign tax carryback						
8. Foreign tax carryforward						
9. Foreign tax or excess limit remaining						13.
Total foreign taxes from all available years to be carried to next year						13.

	2010	2011	2012	2013	2014
1. Foreign tax paid/accrued					
2. FTC carryback to 2020 for amended returns					
3. Reduction in foreign taxes					
4. Foreign tax available					
5. Maximum credit allowable					
6. Unused foreign tax ( + ) or excess of limit ( - )					
7. Foreign tax carryback					
8. Foreign tax carryforward					
9. Foreign tax or excess limit remaining					

Form 1116

Foreign Tax Credit Carryover Statement (Page 2 of 2)

NAME

DANIEL J. SEAVEY

Foreign Income Category

GENERAL LIMITATION INCOME

AMT	2015	2016	2017	2018	2019	2020
1. Foreign tax paid/accrued						21.
2. FTC carryback to 2020 for amended returns						
3. Reduction in foreign taxes						
4. Foreign tax available						21.
5. Maximum credit allowable						5.
6. Unused foreign tax ( + ) or excess of limit ( - )						16.
7. Foreign tax carryback						
8. Foreign tax carryforward						
9. Foreign tax or excess limit remaining						16.
Total foreign taxes from all available years to be carried to next year						16.

	2010	2011	2012	2013	2014
1. Foreign tax paid/accrued					
2. FTC carryback to 2020 for amended returns					
3. Reduction in foreign taxes					
4. Foreign tax available					
5. Maximum credit allowable					
6. Unused foreign tax ( + ) or excess of limit ( - )					
7. Foreign tax carryback					
8. Foreign tax carryforward					
9. Foreign tax or excess limit remaining					

Form 1116

Foreign Source Gains and Losses

NAME

DANIEL J. SEAVEY

PASSIVE INCOME - OTHER COUNTRIES

Long-term capital gain .....	4 .	
Long-term capital loss .....		
Net long-term capital gain/(loss) .....		4 .
Short-term capital gain .....		
Short-term capital loss .....		
Net short-term capital gain/(loss) .....		
Section 1231 gain .....		
Section 1231 loss .....		
Nonrecaptured net Section 1231 losses .....		
Net Section 1231 gain/(loss) .....		
Non-capital gain .....		
Non-capital loss .....		
Net Section 1231 loss .....		
Recaptured Section 1231 losses .....		
Net non-capital gain/(loss) .....		

Foreign source capital gain/(loss) summary:

Net long-term gain/(loss) .....	4 .	
Net short-term gain/(loss) .....		
Net section 1231 gain .....		
Prorata share of U.S. capital loss adjustment .....	- 4 .	
Total foreign source capital gain/(loss) .....		
Prorata share of capital gain rate differential adjustment .....		
Prorata share of capital loss rate differential adjustment .....		
Net foreign source capital gain/(loss) after adjustment .....		
Net capital loss limitation .....		
Non-capital gains .....		
Foreign source gains/(losses) included on Form 1116, Line 1 .....	0 .	
Net capital loss limitation .....		
Net section 1231 loss .....		
Net non-capital asset loss .....		
Other foreign source losses .....		

Foreign source losses included on Form 1116, Line 5 .....		
Foreign source capital loss carryover .....		

02/9/21 04-01-20

Form 1116

Foreign Source Gains and Losses - Alternative Minimum Tax

NAME

DANIEL J. SEAVEY

PASSIVE INCOME - OTHER COUNTRIES

Long-term capital gain .....	4.	
Long-term capital loss .....		
Net long-term capital gain/(loss) .....		4.
Short-term capital gain .....		
Short-term capital loss .....		
Net short-term capital gain/(loss) .....		
Section 1231 gain .....		
Section 1231 loss .....		
Nonrecaptured net Section 1231 losses .....		
Net Section 1231 gain/(loss) .....		
Non-capital gain .....		
Non-capital loss .....		
Net Section 1231 loss .....		
Recaptured Section 1231 losses .....		
Net non-capital gain/(loss) .....		

Foreign source capital gain/(loss) summary:

Net long-term gain/(loss) .....	4.	
Net short-term gain/(loss) .....		
Net section 1231 gain .....		
Prorata share of U.S. capital loss adjustment .....	-4.	
Total foreign source capital gain/(loss) .....		
Prorata share of capital gain rate differential adjustment .....		
Prorata share of capital loss rate differential adjustment .....		
Net foreign source capital gain/(loss) after adjustment .....		
Net capital loss limitation .....		
Non-capital gains .....		
Foreign source gains/(losses) included on Form 1116, Line 1 .....	0.	
Net capital loss limitation .....		
Net section 1231 loss .....		
Net non-capital asset loss .....		
Other foreign source losses .....		

Foreign source losses included on Form 1116, Line 5 .....		
Foreign source capital loss carryover .....		



**Worksheet for Adjusting the Basis of a Partner's Interest in the Partnership**

(Keep for your records.)

Name of Entity: **CV ENTERTAINMENT, LLC**

EIN: **84-2323416**

1. Your adjusted basis at the end of the prior year. Do not enter less than zero.

Enter -0- if this is your first tax year ..... 1. 178,006.

Increases:

2. Money and your adjusted basis in property contributed to the partnership less the associated liabilities (but not less than zero) .....

2. \_\_\_\_\_

3. Your increased share of or assumption of partnership liabilities (Subtract your share of liabilities shown in Item K of your 2019 Schedule K-1 from your share of liabilities shown in Item K of your 2020 Schedule K-1 and add the amount of any partnership liabilities you assumed during the tax year) (but not less than zero) .....

3. 43,204.

4. Your share of the partnership's income or gain (including tax-exempt income) reduced by any amount included in interest income with respect to the credit to holders of clean renewable energy bonds .....

4. 156,724.

5. Any gain recognized this year on contributions of property. Do not include gain from transfer of liabilities .....

5. \_\_\_\_\_

6. Your share of the excess of the deductions for depletion (other than oil and gas depletion) over the basis of the property subject to depletion .....

6. \_\_\_\_\_

Decreases:

7. Withdrawals and distributions of money and the adjusted basis of property distributed to you from the partnership. Do not include the amount of property distributions included in the partner's income (taxable income) .....

7. 251,292.

**Caution:** A distribution may be taxable if the amount exceeds your adjusted basis of your partnership interest immediately before the distribution.

8. Your decreased share of partnership liabilities and any decrease in your individual liabilities because they were assumed by the partnership. (Subtract your share of liabilities shown in item K of your 2020 Schedule K-1 from your share of liabilities shown in item K of your 2019 Schedule K-1 and add the amount of your individual liabilities that the partnership assumed during the tax year (but not less than zero)) .....

8. \_\_\_\_\_

9. Your share of the partnership's nondeductible expenses that are not capital expenditures .....

9. 7,654.

10. Your share of the partnership's losses and deductions (including capital losses). However, include your share of the partnership's section 179 expense deduction for this year even if you cannot deduct all of it because of limitations .....

SEE STATEMENT 20 10. 775.

11. The amount of your deduction for depletion of any partnership oil and gas property, not to exceed your allocable share of the adjusted basis of that property .....

11. \_\_\_\_\_

12. Your adjusted basis in the partnership at end of this tax year. (Add lines 1 through 6 and subtract lines 7 through 11 from the total. If zero or less, enter -0-.) .....

12. 118,213.

**Caution:** The deduction for your share of the partnership's losses and deductions is limited to your adjusted basis in your partnership interest. If you entered zero on line 12 and the amount figured for line 12 was less than zero, a portion of your share of the partnership losses and deductions may not be deductible.

019051 04-01-20

**Worksheet for Adjusting the Basis of a Partner's Interest in the Partnership**

(Keep for your records.)

Name of Entity: **CV ENTERTAINMENT, LLC**EIN: **84-2323416**

1. Your adjusted basis at the end of the prior year. Do not enter less than zero.

Enter -0- if this is your first tax year ..... 1. 178,006.

Increases:

2. Money and your adjusted basis in property contributed to the partnership less the associated liabilities (but not less than zero) .....

2. 0.

3. Your increased share of or assumption of partnership liabilities (Subtract your share of liabilities shown in Item K of your 2019 Schedule K-1 from your share of liabilities shown in Item K of your 2020 Schedule K-1 and add the amount of any partnership liabilities you assumed during the tax year) (but not less than zero) .....

3. 43,204.

4. Your share of the partnership's income or gain (including tax-exempt income) reduced by any amount included in interest income with respect to the credit to holders of clean renewable energy bonds .....

4. 156,724.

5. Any gain recognized this year on contributions of property. Do not include gain from transfer of liabilities .....

5. 0.

6. Your share of the excess of the deductions for depletion (other than oil and gas depletion) over the basis of the property subject to depletion .....

6. \_\_\_\_\_

Decreases:

7. Withdrawals and distributions of money and the adjusted basis of property distributed to you from the partnership. Do not include the amount of property distributions included in the partner's income (taxable income) .....

7. 251,292.**Caution:** A distribution may be taxable if the amount exceeds your adjusted basis of your partnership interest immediately before the distribution.

8. Your decreased share of partnership liabilities and any decrease in your individual liabilities because they were assumed by the partnership. (Subtract your share of liabilities shown in item K of your 2020 Schedule K-1 from your share of liabilities shown in item K of your 2019 Schedule K-1 and add the amount of your individual liabilities that the partnership assumed during the tax year (but not less than zero)) .....

8. \_\_\_\_\_

9. Your share of the partnership's nondeductible expenses that are not capital expenditures .....

9. 7,654.

10. Your share of the partnership's losses and deductions (including capital losses). However, include your share of the partnership's section 179 expense deduction for this year even if you cannot deduct all of it because of limitations .....

SEE STATEMENT 21 10. 775.

11. The amount of your deduction for depletion of any partnership oil and gas property, not to exceed your allocable share of the adjusted basis of that property .....

11. \_\_\_\_\_

12. Your adjusted basis in the partnership at end of this tax year. (Add lines 1 through 6 and subtract lines 7 through 11 from the total. If zero or less, enter -0-.) .....

12. 118,213.**Caution:** The deduction for your share of the partnership's losses and deductions is limited to your adjusted basis in your partnership interest. If you entered zero on line 12 and the amount figured for line 12 was less than zero, a portion of your share of the partnership losses and deductions may not be deductible.

019051 04-01-20

FORM 1040		WAGES RECEIVED AND TAXES WITHHELD				STATEMENT 1	
T S	EMPLOYER'S NAME	AMOUNT PAID	FEDERAL TAX WITHHELD	STATE TAX WITHHELD	CITY SDI TAX W/H	FICA TAX	MEDICARE TAX
T	UNIVERSAL CITY STUDIOS LLC	61.			1.	4.	1.
T	GEP TALENT SERVICES LLC	9.	2.	1.		1.	0.
T	CAST & CREW TALENT SERVICES LLC	1,955.	236.	69.	20.	121.	28.
TOTALS		2,025.	238.	70.	21.	126.	29.

FORM 1040		QUALIFIED DIVIDENDS		STATEMENT 2	
NAME OF PAYER		ORDINARY DIVIDENDS	QUALIFIED DIVIDENDS		
FIDELITY 2746		1,088.	564.		
TOTAL INCLUDED IN FORM 1040, LINE 3A			564.		

FORM 1040		TAX	STATEMENT 3	
DESCRIPTION		AMOUNT		
FROM QUALIFIED DIVIDENDS AND CAPITAL GAIN WORKSHEET		19,445.		
TOTAL TO FORM 1040, LINE 16		19,445.		

FORM 1040		FEDERAL INCOME TAX WITHHELD - FORM(S) W-2		STATEMENT 4	
T S DESCRIPTION		AMOUNT			
T GEP TALENT SERVICES LLC		2.			
T CAST & CREW TALENT SERVICES LLC		236.			
TOTAL TO FORM 1040, LINE 25A		238.			

FORM 1040	CURRENT YEAR ESTIMATES AND AMOUNT APPLIED FROM PREVIOUS YEAR	STATEMENT 5
DESCRIPTION		AMOUNT
1ST QTR ESTIMATE PAYMENT		35,700.
TOTAL TO FORM 1040, LINE 26		35,700.

SCHEDULE 1	SELF-EMPLOYED HEALTH INSURANCE DEDUCTION WORKSHEET	STATEMENT 6
DANIEL J. SEAVEY		
CV ENTERTAINMENT, LLC		
1 NONSPECIFIED HEALTH INSURANCE PAYMENTS		2,299.
2 NET PROFIT FROM TRADE OR BUSINESS UNDER WHICH INSURANCE PLAN IS ESTABLISHED		159,023.
3 TOTAL OF ALL NET PROFITS AND EARNED INCOME. S CORPORATIONS SKIP TO LINE 9	159,023.	
4 DIVIDE LINE 2 BY LINE 3	1.0000	
5 DEDUCTIBLE PORTION OF SELF-EMPLOYMENT TAX	10,542.	
6 LINE 4 TIMES LINE 5		10,542.
7 LINE 2 MINUS LINE 6		148,481.
8 SELF-EMPLOYED SEP, SIMPLE, AND QUALIFIED PLANS ATTRIBUTABLE TO TRADE OR BUSINESS NAMED ABOVE		0.
9 LINE 7 MINUS LINE 8. S CORPORATIONS ENTER WAGES RECEIVED		148,481.
10 FORM 2555, LINE 45 ATTRIBUTABLE TO THE TRADE OR BUSINESS NAMED ABOVE		
11 LINE 9 MINUS LINE 10		148,481.
12 SELF-EMPLOYED HEALTH INSURANCE DEDUCTION. LESSER OF LINE 1 OR LINE 11		2,299.

SCHEDULE A	STATE AND LOCAL INCOME TAXES	STATEMENT 7
DESCRIPTION		AMOUNT
STATE DISABILITY INSURANCE - UNIVERSAL CITY STUDIOS LLC		1.
GEP TALENT SERVICES LLC		1.
CAST & CREW TALENT SERVICES LLC		69.
STATE DISABILITY INSURANCE - CAST & CREW TALENT SERVICES LLC		20.
CALIFORNIA 2ND QTR ESTIMATE PAYMENTS		6,600.
CALIFORNIA 3RD QTR ESTIMATE PAYMENTS		15,000.
TOTAL TO SCHEDULE A, LINE 5A		21,691.

SCHEDULE A	MEDICAL AND DENTAL EXPENSES	STATEMENT 8
DESCRIPTION		AMOUNT
DOCTORS, DENTISTS, ETC.		775.
TOTAL TO SCHEDULE A, LINE 1		775.

SCHEDULE D		SHORT-TERM CAPITAL GAINS AND LOSSES			STATEMENT 9
DESCRIPTION	DATE ACQUIRED	DATE SOLD	SALES PRICE	COST OR OTHER BASIS	GAIN OR LOSS
FIDELITY 2746 - SHORT TERM			12,564.	12,237.	327.
TOTAL TO SCH D, LINE 1A			12,564.	12,237.	327.

SCHEDULE D		LONG-TERM CAPITAL GAINS AND LOSSES			STATEMENT 10
DESCRIPTION	DATE ACQUIRED	DATE SOLD	SALES PRICE	COST OR OTHER BASIS	GAIN OR LOSS
FIDELITY 2746 - LONG TERM			25,834.	31,119.	-5,285.
TOTAL TO SCH D, LINE 8A			25,834.	31,119.	-5,285.

SCHEDULE D	CAPITAL GAIN DISTRIBUTIONS	STATEMENT 11
NAME OF PAYER	TOTAL CAPITAL GAIN	28% GAIN
FIDELITY 2746	61.	
TOTALS TO SCHEDULE D, LINE 13	61.	

SCHEDULE D	CAPITAL LOSS CARRYOVER	STATEMENT 12
1. ENTER THE AMOUNT FROM FORM 1040, LINE 15		105,898.
2. ENTER THE LOSS FROM SCHEDULE D, LINE 21, AS A POSITIVE AMOUNT		3,000.
3. COMBINE LINES 1 AND 2. IF ZERO OR LESS, ENTER -0-		108,898.
4. ENTER THE SMALLER OF LINE 2 OR LINE 3		3,000.
5. ENTER THE LOSS FROM SCHEDULE D, LINE 7, AS A POSITIVE AMOUNT		
6. ENTER THE GAIN, IF ANY, FROM SCHEDULE D, LINE 15		
7. ADD LINES 4 AND 6		
8. SHORT-TERM CAPITAL LOSS CARRYOVER TO NEXT YEAR. SUBTRACT LINE 7 FROM LINE 5. IF ZERO OR LESS, ENTER -0-		
9. ENTER THE LOSS FROM SCHEDULE D, LINE 15, AS A POSITIVE AMOUNT		5,224.
10. ENTER THE GAIN, IF ANY, FROM SCHEDULE D, LINE 7	327.	
11. SUBTRACT LINE 5 FROM LINE 4. IF ZERO OR LESS, ENTER -0-	3,000.	
12. ADD LINES 10 AND 11		3,327.
13. LONG-TERM CAPITAL LOSS CARRYOVER TO NEXT YEAR. SUBTRACT LINE 12 FROM LINE 9. IF ZERO OR LESS, ENTER -0-		1,897.

SCHEDULE E	OTHER INCOME	STATEMENT 13
ROYALTIES		
DESCRIPTION		AMOUNT
AMERICAN SOCIETY OF COMPOSERS - ROYALTIES FROM 10		2,903.
SOUNDEXCHANGE INC - ROYALTIES FROM 1099-MISC		18,538.
TOTAL TO SCHEDULE E, PAGE 1		21,441.

SCHEDULE SE		NON-FARM INCOME	STATEMENT 14
DESCRIPTION			AMOUNT
CV ENTERTAINMENT, LLC			159,023.
TOTAL TO SCHEDULE SE, LINE 2			159,023.

FORM 1116

U.S. CAPITAL LOSS RECLASSIFICATION  
SECTION 904(B)(2)(A)

STATEMENT 15

1	TOTAL CAPITAL GAINS LESS CAPITAL LOSSES. NOT LESS THAN ZERO.	
2	GENERAL LIMITATION CAPITAL GAINS LESS CAPITAL LOSSES. NOT LESS THAN ZERO.	
3	PASSIVE CAPITAL GAINS LESS CAPITAL LOSSES. NOT LESS THAN ZERO.	4.
4	SECTION 951A CAPITAL GAINS LESS CAPITAL LOSSES. NOT LESS THAN ZERO.	
5	FOREIGN BRANCH CAPITAL GAINS LESS CAPITAL LOSSES. NOT LESS THAN ZERO.	
6	SEC 901(J) INCOME CAPITAL GAINS LESS CAPITAL LOSSES. NOT LESS THAN ZERO.	
7	RE-SOURCED BY TREATY INCOME CAPITAL GAINS LESS CAPITAL LOSSES. NOT LESS THAN ZERO.	
8	TOTAL FOREIGN CAPITAL GAINS. ADD LINES 2 THROUGH 7.	4.
9	SUBTRACT LINE 1 FROM LINE 8. IF GREATER THAN ZERO, GO TO LINE 10.	4.
10	U.S. CAPITAL GAINS LESS CAPITAL LOSSES. NOT MORE THAN ZERO.	-4,901.
11	ENTER THE SMALLER OF: LINE 9 OR THE ABSOLUTE VALUE OF LINE 10.	4.
12	GENERAL LIMITATION REALLOCATION. LINE 11 TIMES THE RATIO OF LINE 2 OVER LINE 8.	
13	PASSIVE REALLOCATION. LINE 11 TIMES THE RATIO OF LINE 3 OVER LINE 8.	4.
14	SECTION 951A REALLOCATION. LINE 11 TIMES THE RATIO OF LINE 4 OVER LINE 8.	
15	FOREIGN BRANCH REALLOCATION. LINE 11 TIMES THE RATIO OF LINE 5 OVER LINE 8.	
16	SEC 901(J) INCOME REALLOCATION. LINE 11 TIMES THE RATIO OF LINE 6 OVER LINE 8.	
17	RE-SOURCED BY TREATY INCOME REALLOCATION. LINE 11 TIMES THE RATION OF LINE 7 OVER LINE 8.	



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FORM 1116	ALTERNATIVE MINIMUM TAX FOREIGN TAX CREDIT U.S. CAPITAL LOSS RECLASSIFICATION SECTION 904(B)(2)(A)	STATEMENT 16
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1	TOTAL CAPITAL GAINS LESS CAPITAL LOSSES. NOT LESS THAN ZERO.	
2	GENERAL LIMITATION CAPITAL GAINS LESS CAPITAL LOSSES. NOT LESS THAN ZERO.	
3	PASSIVE CAPITAL GAINS LESS CAPITAL LOSSES. NOT LESS THAN ZERO.	4.
4	SECTION 951A CAPITAL GAINS LESS CAPITAL LOSSES. NOT LESS THAN ZERO.	
5	FOREIGN BRANCH CAPITAL GAINS LESS CAPITAL LOSSES. NOT LESS THAN ZERO.	
6	SEC 901(J) INCOME CAPITAL GAINS LESS CAPITAL LOSSES. NOT LESS THAN ZERO.	
7	RE-SOURCED BY TREATY INCOME CAPITAL GAINS LESS CAPITAL LOSSES. NOT LESS THAN ZERO.	
8	TOTAL FOREIGN CAPITAL GAINS. ADD LINES 2 THROUGH 7.	4.
9	SUBTRACT LINE 1 FROM LINE 8. IF GREATER THAN ZERO, GO TO LINE 10.	4.
10	U.S. CAPITAL GAINS LESS CAPITAL LOSSES. NOT MORE THAN ZERO.	-4,901.
11	ENTER THE SMALLER OF: LINE 9 OR THE ABSOLUTE VALUE OF LINE 10.	4.
12	GENERAL LIMITATION REALLOCATION. LINE 11 TIMES THE RATIO OF LINE 2 OVER LINE 8.	
13	PASSIVE REALLOCATION. LINE 11 TIMES THE RATIO OF LINE 3 OVER LINE 8.	4.
14	SECTION 951A REALLOCATION. LINE 11 TIMES THE RATIO OF LINE 4 OVER LINE 8.	
15	FOREIGN BRANCH REALLOCATION. LINE 11 TIMES THE RATIO OF LINE 5 OVER LINE 8.	
16	SEC 901(J) INCOME REALLOCATION. LINE 11 TIMES THE RATIO OF LINE 6 OVER LINE 8.	
17	RE-SOURCED BY TREATY INCOME REALLOCATION. LINE 11 TIMES THE RATIO OF LINE 7 OVER LINE 8.	

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FORM 8995	QUALIFIED REIT DIVIDENDS AND PTP INCOME	STATEMENT 17
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NAME OF ENTITY/ACTIVITY	REIT DIVIDENDS	PTP INCOME
FIDELITY 2746	25.	
TOTAL TO FORM 8995, LINE 6	25.	

FORM 1116 U.S. AND FOREIGN SOURCE INCOME SUMMARY STATEMENT 18  
FOREIGN DIVIDEND INCOME

DESCRIPTION	AMOUNT
FIDELITY 2746	49.
TOTAL FOREIGN DIVIDEND INCOME	49.

FORM 1116 U.S. AND FOREIGN SOURCE INCOME SUMMARY STATEMENT 19  
TOTAL PARTNERSHIP/S-CORPORATION INCOME/LOSS

DESCRIPTION	INCOME	LOSS
CV ENTERTAINMENT, LLC	159,023.	
TOTAL PARTNERSHIP/S-CORPORATION INCOME/LOSS	159,023.	

PARTNERSHIP BASIS WKST DECREASES IN BASIS STATEMENT 20

CV ENTERTAINMENT, LLC

DESCRIPTION	AMOUNT
OTHER DEDUCTIONS	775.
INCLUDED IN BASIS WORKSHEET, LINE 10	775.

AMT PARTNERSHIP BASIS WORKSHEET DECREASES IN BASIS STATEMENT 21

CV ENTERTAINMENT, LLC

DESCRIPTION	AMOUNT
OTHER DEDUCTIONS	775.
INCLUDED IN BASIS WORKSHEET, LINE 10	775.

**Fill in this information to identify your case:**

Debtor 1 **Daniel James Seavey**  
First Name Middle Name Last Name

Debtor 2  
(Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **CENTRAL DISTRICT OF CALIFORNIA - SAN FERNANDO**

Case number  
(if known)

☐ Check if this is an amended filing

**B 104**

**For Individual Chapter 11 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims Against You and Are Not Insiders**

**12/15**

If you are an individual filing for bankruptcy under Chapter 11, you must fill out this form. If you are filing under Chapter 7, Chapter 12, or Chapter 13, do not fill out this form. Do not include claims by anyone who is an insider. Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20 percent or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Also, do not include claims by secured creditors unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information.

**Part 1: List the 20 Unsecured Claims in Order from Largest to Smallest. Do Not Include Claims by Insiders.**

**Unsecured claim**

<b>1</b>	<b>WMG Merchandize</b> <b>511 Union Street, Suite 1200</b> <b>Nashville, TN 37219</b>	<b>What is the nature of the claim?</b> <u>Merchandize Advance</u>	<u>\$200,000.00</u>
<b>As of the date you file, the claim is:</b> Check all that apply			
<input type="checkbox"/> Contingent			
<input type="checkbox"/> Unliquidated			
<input type="checkbox"/> Disputed			
<input checked="" type="checkbox"/> None of the above apply			
<b>Does the creditor have a lien on your property?</b>			
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes. Total claim (secured and unsecured)			
Value of security: -			
Unsecured claim			

<b>2</b>	<b>Artist Group International, Inc.</b> <b>150 East 58th St., 19th Flr</b> <b>New York, NY 10155</b>	<b>What is the nature of the claim?</b> <u>Tour Advance</u>	<u>\$200,000.00</u>
<b>As of the date you file, the claim is:</b> Check all that apply			
<input type="checkbox"/> Contingent			
<input type="checkbox"/> Unliquidated			
<input type="checkbox"/> Disputed			
<input checked="" type="checkbox"/> None of the above apply			
<b>Does the creditor have a lien on your property?</b>			
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes. Total claim (secured and unsecured)			
Value of security: -			

Debtor 1 **Daniel James Seavey** Case number (if known) \_\_\_\_\_

**212 813 1972**

Contact phone

Unsecured claim

**3**

**Randy Phillips**  
**9255 Doheny Road, Suite 3102**  
**West Hollywood, CA 90069**

What is the nature of the claim?

Loan

\$50,000.00

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
☒ None of the above apply

Does the creditor have a lien on your property?

- ☒ No  
☐ Yes. Total claim (secured and unsecured) \_\_\_\_\_  
Value of security: \_\_\_\_\_  
Unsecured claim \_\_\_\_\_

Contact

Contact phone

**4**

**Chase Bank**  
**P.O. Box 15298**  
**Wilmington, DE 19850-5298**

What is the nature of the claim?

Credit Card

\$40,580.00

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
☒ None of the above apply

Does the creditor have a lien on your property?

- ☒ No  
☐ Yes. Total claim (secured and unsecured) \_\_\_\_\_  
Value of security: \_\_\_\_\_  
Unsecured claim \_\_\_\_\_

Contact

Contact phone

**5**

**Chase Bank**  
**P.O. Box 15298**  
**Wilmington, DE 19850-5298**

What is the nature of the claim?

Credit Card

\$23,366.00

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
☒ None of the above apply

Does the creditor have a lien on your property?

- ☒ No  
☐ Yes. Total claim (secured and unsecured) \_\_\_\_\_  
Value of security: \_\_\_\_\_  
Unsecured claim \_\_\_\_\_

Contact

Contact phone

**6**

**American Express**  
**PO Box 981535**  
**El Paso, TX 79998**

What is the nature of the claim?

Credit Card

\$18,830.00

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
☒ None of the above apply

Debtor 1 Daniel James Seavey Case number (if known) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
Contact \_\_\_\_\_  
\_\_\_\_\_  
Contact phone \_\_\_\_\_

**Does the creditor have a lien on your property?**

- ☒ No  
☐ Yes. Total claim (secured and unsecured) \_\_\_\_\_  
Value of security: - \_\_\_\_\_  
Unsecured claim \_\_\_\_\_

**7**  
**Chase Bank**  
**P.O. Box 15298**  
**Wilmington, DE 19850-5298**

\_\_\_\_\_  
\_\_\_\_\_  
Contact \_\_\_\_\_  
\_\_\_\_\_  
**800-338-5960**  
Contact phone \_\_\_\_\_

**What is the nature of the claim? Credit Card \$18,808.00**

**As of the date you file, the claim is:** Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
☒ None of the above apply

**Does the creditor have a lien on your property?**

- ☒ No  
☐ Yes. Total claim (secured and unsecured) \_\_\_\_\_  
Value of security: - \_\_\_\_\_  
Unsecured claim \_\_\_\_\_

**8**  
**American Express**  
**PO Box 981535**  
**El Paso, TX 79998**

\_\_\_\_\_  
\_\_\_\_\_  
Contact \_\_\_\_\_  
\_\_\_\_\_  
Contact phone \_\_\_\_\_

**What is the nature of the claim? Credit Card \$10,913.00**

**As of the date you file, the claim is:** Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
☒ None of the above apply

**Does the creditor have a lien on your property?**

- ☒ No  
☐ Yes. Total claim (secured and unsecured) \_\_\_\_\_  
Value of security: - \_\_\_\_\_  
Unsecured claim \_\_\_\_\_

**9**  
**Chase Bank**  
**P.O. Box 15298**  
**Wilmington, DE 19850-5298**

\_\_\_\_\_  
\_\_\_\_\_  
Contact \_\_\_\_\_  
\_\_\_\_\_  
**800-338-5960**  
Contact phone \_\_\_\_\_

**What is the nature of the claim? Credit Card \$10,370.00**

**As of the date you file, the claim is:** Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
☒ None of the above apply

**Does the creditor have a lien on your property?**

- ☒ No  
☐ Yes. Total claim (secured and unsecured) \_\_\_\_\_  
Value of security: - \_\_\_\_\_  
Unsecured claim \_\_\_\_\_

**10** **What is the nature of the claim? Credit Card \$9,563.00**

Debtor 1 **Daniel James Seavey** Case number (if known) \_\_\_\_\_

**Chase Bank**  
**P.O. Box 15298**  
**Wilmington, DE 19850-5298**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
☒ None of the above apply

Does the creditor have a lien on your property?

- ☒ No  
☐ Yes. Total claim (secured and unsecured) \_\_\_\_\_  
Value of security: \_\_\_\_\_  
Unsecured claim \_\_\_\_\_

Contact

Contact phone

**11**

**Citi Bank**  
**PO Box 780198**  
**Phoenix, AZ 85062**

What is the nature of the claim?

**Credit Card**

**\$9,240.00**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
☒ None of the above apply

Does the creditor have a lien on your property?

- ☒ No  
☐ Yes. Total claim (secured and unsecured) \_\_\_\_\_  
Value of security: \_\_\_\_\_  
Unsecured claim \_\_\_\_\_

Contact

Contact phone

**12**

**Citi Bank**  
**PO Box 780198**  
**Phoenix, AZ 85062**

What is the nature of the claim?

**Credit Card**

**\$7,244.00**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
☒ None of the above apply

Does the creditor have a lien on your property?

- ☒ No  
☐ Yes. Total claim (secured and unsecured) \_\_\_\_\_  
Value of security: \_\_\_\_\_  
Unsecured claim \_\_\_\_\_

Contact

Contact phone

**13**

**Atlantic Recording Corporation**  
**1633 Broadway**  
**New York, NY 10019**

What is the nature of the claim?

**FOR NOTICING  
PURPOSES ONLY**

**\$0.00**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
☒ None of the above apply

Does the creditor have a lien on your property?

- ☒ No  
☐ Yes. Total claim (secured and unsecured) \_\_\_\_\_

Contact

Debtor 1 Daniel James Seavey Case number (if known) \_\_\_\_\_



Contact phone \_\_\_\_\_

Value of security: \_\_\_\_\_  
Unsecured claim \_\_\_\_\_

14

**EMI, a division of Universal  
Music  
4 Panaras Square  
London, N1C 4AG**

What is the nature of the claim?

**FOR NOTICING  
PURPOSES ONLY**

**\$0.00**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
☒ None of the above apply

Does the creditor have a lien on your property?

- ☒ No  
☐ Yes. Total claim (secured and unsecured)  
Value of security: \_\_\_\_\_  
Unsecured claim \_\_\_\_\_

Contact \_\_\_\_\_

Contact phone \_\_\_\_\_

15

**Kobalt Music Services America,  
Inc.  
2 Gansevoort Street  
New York, NY 10014**

What is the nature of the claim?

**FOR NOTICING  
PURPOSES ONLY**

**\$0.00**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
☒ None of the above apply

Does the creditor have a lien on your property?

- ☒ No  
☐ Yes. Total claim (secured and unsecured)  
Value of security: \_\_\_\_\_  
Unsecured claim \_\_\_\_\_

Contact \_\_\_\_\_

Contact phone \_\_\_\_\_

16

**MIR Partners, Inc dba  
"Sessions"  
201 Spear Street  
Suite 220  
San Francisco, CA 94105**

What is the nature of the claim?

**NOTICING PURPOSES  
ONLY**

**\$0.00**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
☒ None of the above apply

Does the creditor have a lien on your property?

- ☒ No  
☐ Yes. Total claim (secured and unsecured)  
Value of security: \_\_\_\_\_  
Unsecured claim \_\_\_\_\_

Contact \_\_\_\_\_

Contact phone \_\_\_\_\_

17

**Signature Entertainment, LLC  
Attn: Steve T. Miller  
807 W. Morse Blvd., Suite 101**

What is the nature of the claim?

**Artist Agreement**

**\$0.00**

Debtor 1 Daniel James Seavey Case number (if known) \_\_\_\_\_

Winter Park, FL 32789

As of the date you file, the claim is: Check all that apply

- ☒ Contingent  
☒ Unliquidated  
☒ Disputed  
☐ None of the above apply

\_\_\_\_\_  
Contact

\_\_\_\_\_  
Contact phone

Does the creditor have a lien on your property?

- ☒ No  
☐ Yes. Total claim (secured and unsecured)  
Value of security: \_\_\_\_\_  
Unsecured claim \_\_\_\_\_

**Part 2: Sign Below**

Under penalty of perjury, I declare that the information provided in this form is true and correct.

X

Daniel James Seavey  
Signature of Debtor 1

X

\_\_\_\_\_  
Signature of Debtor 2

Date February 16, 2022

Date \_\_\_\_\_



Attorney or Party Name, Address, Telephone & FAX Nos.,  
 State Bar No. & Email Address  
**David L. Neale 141225**  
**2818 La Cienega Avenue**  
**Los Angeles, CA 90034**  
**(310) 229-1234**  
 California State Bar Number: **141225 CA**  
**dln@lnbyb.com**

FOR COURT USE ONLY

- ☐ Debtor(s) appearing without an attorney  
☒ Attorney for Debtor

**UNITED STATES BANKRUPTCY COURT  
 CENTRAL DISTRICT OF CALIFORNIA - SAN FERNANDO**

In re:

**Daniel James Seavey**

CASE NO.:

CHAPTER: 11

**VERIFICATION OF MASTER  
 MAILING LIST OF CREDITORS**

**[LBR 1007-1(a)]**

Debtor(s).

Pursuant to LBR 1007-1(a), the Debtor, or the Debtor's attorney if applicable, certifies under penalty of perjury that the master mailing list of creditors filed in this bankruptcy case, consisting of 0 sheet(s) is complete, correct, and consistent with the Debtor's schedules and I/we assume all responsibility for errors and omissions.

Date: February 16, 2022

Signature of Debtor 1

Date: \_\_\_\_\_

Signature of Debtor 2 (joint debtor ) (if applicable)

Date: \_\_\_\_\_

Signature of Attorney for Debtor (if applicable)

Daniel James Seavey  
5635 Bellingham Ave  
Valley Village, CA 91607

David L. Neale  
Levene, Neale, Bender, Yoo & Golubchik L.L.P.  
2818 La Cienega Avenue  
Los Angeles, CA 90034

U.S. Trustee San Fernando Valley  
915 Wilshire Blvd.  
Suite 1850  
Los Angeles, CA 90017

American Express  
PO Box 981535  
El Paso, TX 79998

Artist Group International, Inc.  
150 East 58th St., 19th Flr  
New York, NY 10155

Atlantic Recording Corporation  
1633 Broadway  
New York, NY 10019

Barnes & Thornburg LLP  
Attn: Joel Katz and Jason M. Karlov  
2029 Century Park East, 3rd Floor  
Los Angeles, CA 90067

Charles E. Muller, II  
7385 Galloway Road  
Suite 200  
Miami, FL 33173

Chase  
700 Kansas Lane

Chase Bank  
P.O. Box 15298  
Wilmington, DE 19850-5298

Citi Bank  
PO Box 780198  
Phoenix, AZ 85062

EMI, a division of Universal Music  
4 Panaras Square  
London, N1C 4AG

Gordon Su  
355 1st STreet  
Apt. S2109  
San Francisco, CA 94105

Jeffrey Seavey  
4500 Via Marina  
#124  
Marina Del Rey, CA 90292

Kobalt Music Services America, Inc.  
2 Gansevoort Street  
New York, NY 10014

Los Angeles County Tax Collector  
PO Box 54018  
Los Angeles, CA 90054

Michael R. Levin  
Baker & Hostetler, LLP  
200 S. Orange Avenue, Suite 2300  
Orlando, FL 32801

MIR Partners, Inc dba Sessions  
201 Spear Street  
Suite 220  
San Francisco, CA 94105

Randy Phillips  
9255 Doheny Road, Suite 3102  
West Hollywood, CA 90069

Signature Entertainment, LLC  
Attn: Steve T. Miller  
807 W. Morse Blvd., Suite 101  
Winter Park, FL 32789

Tesla Finance  
45500 Fremont Blvd.  
Fremont, CA 94538

WMG Merchandize  
511 Union Street, Suite 1200  
Nashville, TN 37219